

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) DON ARMSTRONG  
 Name

(2) 1363 HORN BEAM CT  
 Address (number and street)

NORTH FORT MYERS, FL 33917  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1165472]

Submitted on:  
 8/6/2018 05:40:23 (eastern)

Check here if address has changed

(3) ID Number: 1385

(4) Check appropriate box(es):

- Candidate Office Sought: SCHOOL BOARD-4
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 7 / 28 / 2018 To 8 / 3 / 2018 Report Type: P5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 210 . 39

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 210 . 39

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 3 , 595 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 2 , 936 . 43

### (11) Certification

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

I certify that I have examined this report and it is true, correct, and complete:

(Type name) \_\_\_\_\_  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name**       DON ARMSTRONG       **(2) I.D. Number**       1385        
**(3) Cover Period**       7/28/2018       through       8/3/2018       **(4) Page**       1       of       0      

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type      Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name DON ARMSTRONG

(2) I.D. Number 1385

(3) Cover Period 7/28/2018 through 8/3/2018

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
8/1/2018 //	Regions Bank, Regions 13520 N. Cleveland Ave North Fort Myers, FL 33903	account monthly fee	MO		\$7.00
1					
8/1/2018 //	Sign & Design, 960 Pondella Rd North Fort Myers, Fl 33903	sign deposit	MO		\$190.80
2					
8/2/2018 //	Go Daddy, Go 14455 N. Hayden Rd. Ste. 226 Scottsdale, AZ 85260	website manager	MO		\$12.59
3					
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