CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	TOM MERE	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	100 E NORTH SHORE AVE	Submitted on:							
	Address (number and street)	8/24/2018 09:40:04 (eastern)							
	NORTH FORT MYERS, FL 33917								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:1481							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: NORTH FORT MY	ERS FIRE-3							
	Political Committee (PC)	Charlebon # DO on EOO bon disharded							
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded☐ Check here if PTY has disbanded							
		☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
(5) Report Identifiers									
Cove	er Period: From 8 / 11 / 2018 To	8 / 23 / 2018 Report Type: P7							
X O		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(0)	Contributions This Report								
Cach	n & Checks \$,, 0.00	Monetary Expenditures \$ , , 0 . 00							
Oasi	T & OTICORS	,,, <u></u>							
Loar	ns \$ , , 50.00	Transfers to							
	<del></del>	Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , 50 . 00								
		Total Monetary \$ , , 0 . 00							
In-Ki	ind \$,,,000								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,, 50.00	\$ , , 0.00							
	(11) Cert								
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:									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
х		X							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name TOM MERE (2) I.D. Number							1481	
(2) Cours Bosis	8/11/2018	8/23/2018 through / / (4) Page			sı 1	1 1		
(3) Cover Perio	oa///	ruic	ougn	11	(4) Pag	je <u> </u>	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &		ontributor	Contribution	In-kind			
Number	City, State, Zip Code Mere, Thomas C	Type S	Occupation retired	Type LO	Description \$50 loan	Amendment	Amount \$50.0	
8/21/2018	100 E North Shore Ave N Ft Myers, Fl 33917				to begin bank		Ų30.0	
1					account			
1 1								
1 1								
1 1								
1 1								
1 1								
/ /								
1 1								

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name <sup>TOM</sup>	CAMPAIGN TREASURER'	ED EXPENDITURES (2) I.D. Number 1481			
(3) Cover Period	8/11/2018 /through_	8/23/2018 //	4) Page1	of	0
(5) Date (6) Sequence Number	(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)	(11) Amount
//					
//					
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