

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) LISANDRA COLON  
 Name  
 (2) PO BOX 62395  
 Address (number and street)  
FORT MYERS, FL 33906  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1193220]  
 Submitted on:  
 10/10/2019 09:36:00 (eastern)

Check here if address has changed (3) ID Number: 1548

(4) Check appropriate box(es):  
 Candidate Office Sought: SCHOOL BOARD-7 AT LARGE  
 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 9 / 1 / 2019 To 9 / 30 / 2019 Report Type: 19M9  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 0 . 00  
 Loans \$        ,        , 0 . 00  
 Total Monetary \$        ,        , 0 . 00  
 In-Kind \$        ,        , 4 . 99

**(7) Expenditures This Report**

Monetary Expenditures \$        ,        , 0 . 00  
 Transfers to Office Account \$        ,        , 0 . 00  
 Total Monetary \$        ,        , 0 . 00

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        ,        , 241 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        ,        , 132 . 16

### (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 LISANDRA COLON (2) I.D. Number 1548  
 (3) Cover Period 9/1/2019 through 9/30/2019 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
9/8/2019 / /	Colon, Lisandra I 8736 Fordham Street Fort Myers, FL 33907	S		IK	campaign cell phone		\$4.99
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name LISANDRA COLON

(2) I.D. Number 1548

(3) Cover Period 9/1/2019 through 9/30/2019

(4) Page 1 of 0

(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					
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