CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	DAVID H KLEIN	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	4731 BONITA BAY BLVD.; UNIT #1203	[1232628]								
	Address (number and street)	Submitted on: 9/30/2020 15:17:23 (eastern)								
	BONITA SPRINGS, FL 34134	——————————————————————————————————————								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1584								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: LEE MEMORIAL HEALTH SYSTEM-3 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 									
	(5) Report	Identifiers								
Cove	er Period: From 9 / 12 / 2020 To									
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$, 2 , <u>150</u> . <u>00</u>	Monetary Expenditures \$, _12 , 177 . 15								
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$,2 ,2 ,0	Total Monetary \$,12 , <u>177</u> . <u>15</u>								
In-Ki	nd \$, , 0 . 00									
		(8) Other Distributions \$, , <u>0</u> 00								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>47</u> , <u>865</u> . <u>32</u>								
_(T)	(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 Treasurer Deputy Treasurer Candidate Chairperson (only for PC and PTY)									
	electioneering comm.)	_ Sandidate Onlangerson (Unity for FO affor FIT)								
X		X								
Sic	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name		(2		1584					
	9/12/20	20		9/25/	2020				
(3) Cover Period	1	1	through	1	1	(A) Page	1	of	1

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
9/23/2020	Laughton, Barbara 9025 Isla Bella Circle Bonita Springs, FL 34135	I	ceo sweepstake s co	CH	2000,000		\$500.0
9/21/2020 / /	Monroe, Ann 1064 Amherst Street Buffalo, NY 14216	I		СН			\$50.0
9/15/2020	Hefner, David 505 N. Lakeshore Dr, Apt 43 Chicago, IL 60611	I 306	healthcare	e CH			\$100.0
9/23/2020	Bowser, Tom 9232 Parkside Dr Prairie Village, KS 66207	I	retired healthcare	CH :			\$100.0
9/23/2020	Eidlin, Mark 11 Great Oak Lane Pittsford, NY 14534	I	financial advisor	СН			\$1,000.0
9/23/2020	Parsons, William 5781 Mango Lane Naples, FL 34110	I	retired	СН			\$100.0
9/23/2020 / / /	Fishman, Len 29 Mount Hood Rd Apt 12 Boston, MA 02136	I	professor	СН			\$200.0
9/24/2020	Gittens, Robert 15 Montague St Dorchester, MA 02124	I	ceo not for profit	CH			\$100.0

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DAVID	H KLEIN	1				_ (2) I.D. Nun	nber	-	1584	
	9/12/2	020		9/25/20	020					
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
9/21/2020	Priority Marketing of SWFL, 12140 Carissa Commerce Ct Ste 201 Fort Myers, FL 33966	marketing	МО		\$12,154.20
9/24/2020	PayPal, 2211 N First St San Jose, CA 95131	bank fee	МО		\$22.95
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DS-DE 14 (Rev	4440 Y				