

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) DAVID H KLEIN  
 Name  
 (2) 4731 BONITA BAY BLVD.; UNIT #1203  
 Address (number and street)  
BONITA SPRINGS, FL 34134  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1233396]  
 Submitted on:  
 10/7/2020 07:06:43 (eastern)

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)  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 / 26 / 2020 To 10 / 2 / 2020 Report Type: 20G4  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,      , 50 . 00  
 Loans \$      ,      , 0 . 00  
 Total Monetary \$      ,      , 50 . 00  
 In-Kind \$      ,      , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      , 4 , 301 . 75  
 Transfers to Office Account \$      ,      , 0 . 00  
 Total Monetary \$      , 4 , 301 . 75

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

**(9) TOTAL Monetary Contributions To Date**  
 \$      , 69 , 830 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      , 52 , 167 . 07

### (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 DAVID H KLEIN (2) I.D. Number 1584  
 (3) Cover Period 9/26/2020 through 10/2/2020 (4) Page 1 of 1

(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
9/26/2020 / /	Patricca, Christine I ***Protected Voter***	I	professor	CH			\$50.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name DAVID H KLEIN

(2) I.D. Number 1584

(3) Cover Period 9/26/2020 through 10/2/2020

(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					
9/28/2020 / /	Priority Marketing of SWFL, 12140 Carissa Commerce Ct Ste 201 Fort Myers, FL 33966	marketing	MO		\$4,300.00
1					
9/26/2020 / /	PayPal, 2211 North 1st Street San Jose, CA 95131	bank fee	MO		\$1.75
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					