

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CATHY KRUSE  
 Name

(2) 738 ARTHUR AVE  
 Address (number and street)

LEHIGH ACRES, FL 33936  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1241687]

Submitted on:  
 1/14/2021 16:33:28 (eastern)

Check here if address has changed (3) ID Number: 1731

(4) Check appropriate box(es):

Candidate Office Sought: LEHIGH ACRES FIRE-1

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 8 / 29 / 2020 To 9 / 11 / 2020 Report Type: 20G2

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , -500.00

Loans \$        ,        , -10.00

Total Monetary \$        ,        , -510.00

In-Kind \$        ,        , 0.00

**(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**  
 \$        , 2 , 500.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        ,        , 105.25

### (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 CATHY KRUSE (2) I.D. Number 1731  
 8/29/2020 through 9/11/2020  
 (3) Cover Period / / through / / (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
9/5/2020 / /	SW Fl Prof F/F & Paramedics, 12651 McGregor Blvd. Suite 2-203 Fort Myers, FL 33919	O profession al organizati on	CH		Delete	\$500.00
1						
9/5/2020 / /	SW Fl Prof F/F & Paramedics, 12651 McGregor Blvd. Suite 2-203 Fort Myers, FL 33919	O profession al organizati on	CH		Add	\$0.00
2						
9/11/2020 / /	Kruse, Cathy 738 Arthur Avenue Lehigh , FL 33936	S educator	LO	voter data-base list	Delete	\$10.00
3						
9/11/2020 / /	Kruse, Cathy 738 Arthur Avenue Lehigh , FL 33936	S educator	LO	voter data-base list	Add	\$0.00
4						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						

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

(1) Name CATHY KRUSE

(2) I.D. Number 1731

(3) Cover Period 8/29/2020 through 9/11/2020

(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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