CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Joseph Robert Gambino	OFFICE USE ONLY								
` ,	Name	ONLINE SUBMISSION								
(2)	822 Lystra Ave	[1271257]								
	Address (number and street)	Submitted on:								
	Fort Myers, FL 33913	7/26/2022 11:21:25 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1957								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: COUNTY COMMISSIONER-5 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 									
	(5) Report	Identifiers								
Cove	er Period: From 7 / 16 / 2022 To	7 / <u>22</u> / <u>2022</u> Report Type: <u>P4</u>								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casł	n & Checks \$, , 0 . 00	Monetary Expenditures \$,2 , 099 . 99								
Loar	s \$, <u>5</u> , <u>000</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$, 5 , _00000	Total Monetary \$, 2 ,099 . 99								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$, , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>18</u> , <u>000</u> . <u>00</u>	\$, <u>9</u> , <u>709</u> . <u>69</u>								
<u>(T</u>	(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									
		v.								
<u>X</u>	gnature	X Signature								
يات حا	griature	oignature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Joseph Robert Gambi	no		(2) I.D. Number			
	7/16/2022			/22/2022			
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	5.20	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/18/2022 / /	Gambino, Joseph Robert 822 Lystra Ave	S	chiropract or		Description		\$5,000.0
1	Fort Myers, FL 33913						
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1 1							
DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	S AND CODE VALU	JES	

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Toseph	Robert	Gamb	ino			 (2) I.D. Nun	nber	1	L957	
		7/16/2	022		7/22/2	022					
(3) Cover Po	eriod	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
7/18/2022	SouthWest FL Business TOD, 308 SE 25th Ter Cape Coral, fl 33904	campaign advertising	МО		\$1,400.00
1	cape corar, ir sssor				
7/18/2022	SWFL's B2B Marketplace, PO BOX 152299 Cape Coral , FL 33915	advertisement	МО		\$499.99
2					
7/20/2022	Southwest FL Business TOD, 308 SE 25th Ter Cape Coral , FL 33904	advertisement	МО		\$200.00
3					
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DS-DE 14 (Rev.	44/42				