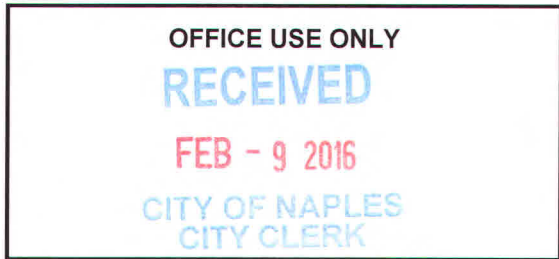


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MICHELLE L. MCLEOD
 Name
 (2) 728 OLD TRAIL DR
 Address (number and street)
NAPLES, FL 34103
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: NAPLES CITY COUNCIL
 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 1/01/2016 / _____ To 1/31/2016 / _____ Report Type: _____
 Original Amendment Special Election Report

(6) **Contributions This Report**

Cash & Checks \$ 1,475.00 , _____ . _____
 Loans \$ _____ , _____ , _____ . _____
 Total Monetary \$ 1,475.00 , _____ . _____
 In-Kind \$ _____ , _____ , _____ . _____

(7) **Expenditures This Report**

Monetary Expenditures \$ 597.73 , _____ . _____
 Transfers to Office Account \$ _____ , _____ , _____ . _____
 Total Monetary \$ 597.73 , _____ . _____

(8) **Other Distributions**
 \$ _____ , _____ , _____ . _____

(9) **TOTAL Monetary Contributions To Date**
 \$ 8,938.00 , _____ . _____


(10) **TOTAL Monetary Expenditures To Date**
 \$ 5,945.45 , _____ . _____

(11) Certification

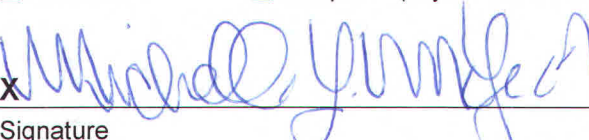
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Susan P. Christopher
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
 Signature

(Type name) Michelle L. McLeod
 Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MICHELLE L. MCLEOD (2) I.D. Number _____

(3) Cover Period 1/01/2016 / / through 1/31/2016 / / (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
1/08/2016 / /	LYNN AND JOHN CANTISANO 12150 CANNON LANE FT MYERS, FL 33912-14	I		CHE			\$ 100.00
1							
1/4/2016 / /	ED KILBOURN 755 PARKVIEW LANE NAPLES, FL 34103	I		CHE			\$ 25.00
2							
1/11/2016 / /	WILLIAM SCHWEIKHARDT 468 DEVILS LANE NAPLES, FL 34103-3020	I	RETIRED ATTN	CHE			\$ 500.00
3							
1/21/2016 / /	NANCY COX PAUL EPSTEIN 4409 LEALAND LANE NASHVILLE, TN 37204	I	DIR OF INSTI	CHE			\$ 200.00
4							
1/25/2016 / /	STEPHEN FARRINGTON 388 2nd AVE NORTH NAPLES, FL 34102	I	COMMERCIAL R	CHE			\$ 500.00
5							
1/27/2016 / /	MICHAEL WATKINS ELLIN GOETZ 439 3RD AVE NORTH NAPLES, FL 34102	I	BUSINESS OWN	CHE			\$ 150.00
6							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name MICHELLE L. MCLEOD

(2) I.D. Number _____

(3) Cover Period 1/01/2016 / _____ through 1/31/2016 / _____

(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					
1/8/2016 / 1	MCLEOD, MICHELLE 728 OLD TRAIL DR NAPLES, FL 34103	REIMB. FOR CAR DOOR MAGNET SIGNS, CHRISTMAS PARADE AND BOAT PARADE SUPPLIES	RMB		\$ 167.67
1/8/2016 / 2	CITY OF NAPLES 735 8th STREET SOUTH NAPLES, FL 34103	QUALIFYING FEE	CAN		\$ 284.00
1/13/2016 / 3	PRESSTIGE PRINTING 10940 HARMONY PARK DRIVE BONITA SPRINGS, FL 34135	BUSINESS CARDS	CAN		\$ 100.70
1/26/2016 / 4	NAPLES ENGRAVING 2093 TAMiami TR NORTH NAPLES, FL 34102	NAME TAG	CAN		\$ 29.53
1/31/2016 / 5	PAYPAL 2211 NORTH FIRST STREET SAN JOSE, CA 95131	CREDIT CARD PROCESSING FEES FOR JANUARY	CAN		\$15.83
/ /					
/ /					
/ /					