

## 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

**OFFICE USE ONLY**  
**RECEIVED**  
 DEC 10 2015  
 CITY OF NAPLES  
 CITY CLERK

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 11/01/2015/ To 11/30/2015/ Report Type: \_\_\_\_\_

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$ 100.00 , \_\_\_\_ . \_\_\_\_  
 Loans \$ \_\_\_\_ , \_\_\_\_ , \_\_\_\_ . \_\_\_\_  
 Total Monetary \$ 100.00 , \_\_\_\_ . \_\_\_\_  
 In-Kind \$ \_\_\_\_ , \_\_\_\_ , \_\_\_\_ . \_\_\_\_

**(7) Expenditures This Report**

Monetary Expenditures \$ 499.60 , \_\_\_\_ . \_\_\_\_  
 Transfers to Office Account \$ \_\_\_\_ , \_\_\_\_ , \_\_\_\_ . \_\_\_\_  
 Total Monetary \$ 499.60 , \_\_\_\_ . \_\_\_\_

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

**(9) TOTAL Monetary Contributions To Date**  
 \$ 6,463.00 , \_\_\_\_ . \_\_\_\_

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 4,559.50 , \_\_\_\_ . \_\_\_\_

### (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

  
 Signature

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

  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 11/01/2015 /    /    through 11/30/2015 /    /    (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
(6) Sequence Number							
11/02/2015 / / 1	RICHARD & MARTHA DYKMAN 5040 SEASHELL AVE NAPLES, FL 34103	I		CHE			\$ 50.00
11/30/2015 / / 2	JOHN KRONON JR 4072 BELAIR LN #102 NAPLES, FL 34103	I		CHE			\$ 50.00
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name MICHELLE L. MCLEOD

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 11/01/2015 / \_\_\_\_\_ through 11/30/2015 / \_\_\_\_\_

(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					
11/22/2015	MCLEOD, MICHELLE 728 OLD TRAIL DR NAPLES, FL 34103	REIMB. FOR DONATION ENVELOPES, CAR MAGNETS, AND T-SHIRTS	RMB		\$ 499.60
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