CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	JAMES MOON	OFFICE USE ONLY					
(2)	Name 1260 DIANA AVENUE	8 6 362 40 3010 10					
(2)	Address (number and street)	MAR - 4 2016					
	NAPLES, FLORIDA 34103	CITY OF NAPLES CITY CLERK					
	City, State, Zip Code						
(4)	Check here if address has changed	(3) ID Number:					
(4) Check appropriate box(es):							
	(5) Report	Identifiers					
Cov	er Period: From 01/01/2016/ To	01/31/2016/ Report Type:					
	Original ✓ Amendment ☐ Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cas	h & Checks \$ 918.92 ,	Monetary Expenditures \$ 595,02 ,					
Loa	s <u>0</u> , ,	Transfers to Office Account \$, , .					
Tota	1 Monetary \$ 918.,92 ,	Total Monetary \$ 595.02 ,					
In-K	ind \$ <u>0</u> , ,						
		(8) Other Distributions \$, ,					
(9)	TOTAL Monetary Contributions To Date \$ 1,103.92	(10) TOTAL Monetary Expenditures To Date \$ 609.94,,					
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) I certify that have examined this report and it is true, correct, and complete:							
(T	ype name) JAMES MOON Individual (only for IE Treasurer Deputy Treasurer election ering comm.)	(Type name) AMES MOON Candidate Chairperson (only for PC and PTY)					
S	ignature	Signature					

AMENDED

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JAMES MOON	(2) I.D. Number ⁸¹⁻⁰⁷⁶⁴⁵³²					
(3) Cover Period 1/1/16/		through _ 1/31/16	/	(4) Page	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
1	CITY OF NAPLES - ELECTION FUND	FILING FEE	CAN		284.00
2	SIGN OF THE TIMES	YARD SIGNS	CAN		279.92
3	PAY PAL	FEES CHARGED BY MONEY COLLECTION AGENCY	CAN		12.10
1/19/16	SUNTRUST BANK	BANK FEES	CAN		7.00
./19/16	GODADDY.COM	CAMPAIGN WEBSITE	CAN		12.00
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name		(2			I.D. Number	81-0764532	
(3) Cover Period	AMENDED 01/01/2016	throu	gh/	16 /	_ (4) Page	01	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12)
1/2/16 / /	FRED MESSLER 2661 ARBUTUS NAPLES, FL	I	RETIRED	CHE			15.00
1/5/16 /	SELF	S		CHE			563.92
1/7/16 / /	PATRICK KANE, M.D. 848 1ST AVENUE N. NAPLES, FL 34102	I	MEDICAL PA	СНЕ			100.00
1/7/15 /	MARJI KILGUS 2053 17TH STREET SW NAPLES, FLORIDA	I	XMAS LIGHTS	CHE			50.00
1.8.15	BONNIE KAUFFMAN 2843 LONE PINE LANE NAPELS, FLORIDA	I	HOMEMAKER	CHE			40.00
1.9.16	MONICA ROBINSON 5444 HARBOUR CASTLE DR FORT MYERS, FLORIDA	I	HOMEMAKER	CHE			50.00
1.9.16	CYNTHIA GARRISON 554 VINTAGE RESERVE LANE NAPLES, FLORIDA	ī	NURSE	CHE			100.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES