

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) AMELIA BURNS QUAREMBA
 Name
 (2) 5051 PELICAN COLONY BLVD # 1604
 Address (number and street)
BONITA SPRINGS FL 34134
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: CITY COUNCIL, DIST 1, CITY OF BONITA SPRINGS, FL
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 08 01 17 To 08 31 17 Report Type: M8

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ 0.00

Loans \$ _____

Total Monetary \$ _____ 0.00

In-Kind \$ _____ 15.00

(7) Expenditures This Report

Monetary Expenditures \$ _____

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ _____ 100.00

(10) TOTAL Monetary Expenditures To Date
 \$ _____

(11) Certification

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

ABC

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

(Type name) JAMES A. QUAREMBA
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X [Signature]
 Signature

(Type name) AMELIA BURNS QUAREMBA
 Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name AMELIA BURNS QUAREMBA (2) I.D. Number _____

(3) Cover Period 08 10 1 17 through 08 13 1 17 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11)	(12)
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description	Amendment	Amount
08 12 1 17 1	JAMES A QUAREMBA 5051 PELICAN COLONY BLVD, #1604 BONITA SPRING FL 34134		RETIRED	CAS CAS	PAY FOR PETITION VERIFICATION		15 15
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							



**LEE COUNTY
ELECTIONS**

RECEIPT FOR PETITIONS SUBMITTED

P.O. Box 2545, Fort Myers, FL 33902-2545

(239) LEE-VOTE (533-8683) Fax (239) 533-6310

www.lee.vote

This is a receipt for petitions submitted. Certification of validated signatures issued separately.

<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> COMMITTEE: <u>Amy Burns Quaremba</u> <div style="text-align: right; font-size: small;"><i>Candidate or Committee Name</i></div>					
PETITION: <u>Bonita Springs</u> <div style="text-align: center; font-size: small;"><i>Office Sought (if candidate) or Petition Title and Serial Number (if serial number is available)</i></div>					
Date Received	Number Submitted	Undue Burden	Payment Received	Payment Amount	Received By
8/24/17	150	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Prepaid <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No* <input type="checkbox"/> Balance Due*	\$15.00	C. Futch
Additional comments, if any:					

Signature verification fees must be paid in advance. If signature verification fees are not paid at time of submission, or if there is a balance due on prepaid signature verification, signature verification will be suspended until applicable fees are paid in full. Section 99.097(4) Florida Statutes