

CAMPAIGN TREASURER'S REPORT SUMMARY

1) SUSAN NEMEC
Name

2) 7010 PINE HOLLOW DR.
Address (number and street)

MOUNT DORA, FL 32757
City, State, Zip Code

OFFICE USE ONLY

Rec'd 10/10/16 @ 10:30 AM
Denny

Check here if address has changed

(3) ID Number: G-3 Ann

(4) Check appropriate box(es):

Candidate Office Sought: MOUNT DORA CITY COUNCIL AT LARGE

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 9/17/16 To 9/30/16 Report Type: G-3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 25.00

Loans \$, ,

Total Monetary \$, ,

In-Kind \$, , 330.29

(7) Expenditures This Report

Monetary Expenditures \$, , 1,234.94

Transfers to Office Account \$, ,

Total Monetary \$, , 1,234.94

(8) Other Distributions

\$, , ~~3,688.76~~

(9) TOTAL Monetary Contributions To Date

\$, , 4,568.01

(10) TOTAL Monetary Expenditures To Date

\$, , 3,688.76

(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 NEMEC

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

(Type name) SUSAN NEMEC

Candidate Chairperson (only for PC and PTY)

X Susan Neme
Signature

X Susan Neme
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name SUSAN NEMEC (2) I.D. Number _____

(3) Cover Period 9/17/16 through 9/30/16 (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		Type	Occupation	Type	Description		Amount
9, 26, 16	RICHARD C HARDWAY ALICE FAYE HARDWAY 3028 NEW HAVEN PL MOUNT DORA, FL 32757-8835	I		CHE			\$25.00
9, 26, 16	Susan Morangelli Nemeec 7010 Pine Hollow Dr Mount Dora, FL 32757	S	CAN	INK	STAMPS		\$110.00
9, 30, 16	Charles Townsend, L.L.C. 811 West North Blvd. Leesburg, FL 34748	S	CAN	INK	CAR MAGNETS		\$220.29
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name SUSAN NEMEC (2) I.D. Number _____

(3) Cover Period 9/17/16 through 9/30/16 (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
9/24/16	USPS 711 N. DONNELLY ST. MT. DORA, FL 32757	STAMPS	CAN		\$170.-
9/24/16	USPS 711 N. DONNELLY ST. MT. DORA, FL 32757	STAMPS	CAN		\$510.-
9/24/16	USPS 711 N. DONNELLY ST. MT. DORA, FL 32757	STAMPS	CAN		\$510.-
9/24/16	OFFICE DEPOT 17081 US HWY 441 MT. DORA, FL 32757	LABELS	CAN		\$44.94
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CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Susan Nemece
Name

(2) 7010 Pine Hollow Dr.
Address (number and street)

MOUNT DORA, FL 32757
City, State, Zip Code

OFFICE USE ONLY

Rec'd 10/10/14 @ 10:30 AM
Dunn 9.

Check here if address has changed

(3) ID Number: ~~AW~~ AW

(4) Check appropriate box(es):

Candidate Office Sought: MOUNT DORA CITY COUNCIL AT LARGE

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 10 / 1 / 14 To 10 / 7 / 16 Report Type: 6-4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ 33.00

Transfers to Office Account \$ _____

Total Monetary \$ _____ 33.00

(8) Other Distributions
\$ _____

(9) TOTAL Monetary Contributions To Date
\$ _____ 4,568.01

(10) TOTAL Monetary Expenditures To Date
\$ _____ ~~2,486.82~~ 3,721.76

(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 Nemece

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

(Type name) Susan Nemece

Candidate Chairperson (only for PC and PTY)

X Susan Nemece
Signature

X Susan Nemece
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name SUSAN NEMCE (2) I.D. Number _____

(3) Cover Period 10, 1, 16 through 10, 7, 16 (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					
10/5/16	TRAC FONE 9700 NW 112th AVE. MIAMI, FL 33178	TRAC FONE ADD MINUTES	CAN		\$ 33.00
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