

## 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

Check here if address has changed

OFFICE USE ONLY

Rec'd 10/16/14 @ 10:30am  
Dunn 9.

(3) ID Number: ~~627~~ 22

(4) Check appropriate box(es):

- Candidate    Office Sought: MOUNT DORA CITY COUNCIL AT LARGE
- 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 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~~ 22 22 22  
3721.76

### (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

**X** Susan Nemece  
Signature

(Type name) Susan Nemece

Candidate     Chairperson (only for PC and PTY)

**X** Susan Nemece  
Signature

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

(1) Name SUSAN NOMECE

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

(3) Cover Period 10 / 1 / 16 through 10 / 7 / 16

(4) Page 1 of 1

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|-------------|--|--|----------------------------|-------------------|----------------|
| 10/5/16     | TRAC FONE<br>9700 NW 112th AVE.<br>MIAMI, FL 33178   | TRAC FONE<br>ADD MINUTES   | CAN                        |                   | \$<br>33.00    |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |
| 1 /         |  |  |                            |                   |                |