

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) FRED BURSON

Name

(2) 1228 MORNING SIDE DR

Address (number and street)

FORT MYERS FL. 33901

City, State, Zip Code

OFFICE USE ONLY

HRV 5 12 2:14P

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate Office Sought: CITY COUNCIL WARD 5

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 04 / 01 / 2022 To 04 / 30 / 2022 Report Type: 2022 M-4

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Total Monetary \$ NONE

In-Kind \$ \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_

Transfers to Office Account \$ NONE

Total Monetary \$ \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 19, 700. 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 7, 823. 34

### (11) Certification

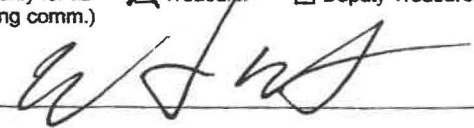
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) ROBERT BEATTIE

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

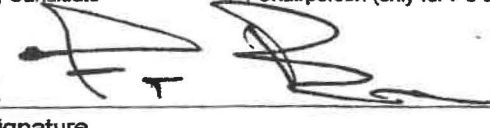
X  
Signature



(Type name) FRED BURSON

Candidate  Chairperson (only for PC and PTY)

X  
Signature



**CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name FRED BURSON (2) I.D. Number \_\_\_\_\_

(3) Cover Period 04 / 01 / 2022 through 04 / 30 / 2022 (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
/ /							
/ /							
/ /		NONE					
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name FRED BURSON (2) I.D. Number \_\_\_\_\_

(3) Cover Period 04/01/2022 through 04/30/2022 (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					
///					
///					
///		<b>NONE</b>			
///					
///					
///					
///					