CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	FAMILIES FOR CAPE CORAL'S FUTURE PAC	INC. NECELYEN						
( ' '	Name							
(2)	824 SE 47TH ST, UNIT 5	AUG - 2 2024						
	Address (number and street)							
	CAPE CORAL, FL 33904 City, State, Zip Code							
	Check here if address has changed	(3) ID Number:						
		(3) ID Number:						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: ☐ Political Committee (PC)							
<u></u>	☐ 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						
	and the second s							
(5) Report Identifiers								
Cov	rer Period: From 07 / 20 /2024 To	07 / 26 /2024 Report Type: 24-P5						
☑ Original ☐ Amendment ☐ Special Election Report								
(6)	Contributions This Report	(7) Expenditures This Report						
	25 00	Monetary 35 00						
Cas	h & Checks \$,, 35 . 00	Expenditures \$ , , 35 . 00						
Loa	ns \$ , , .	Transfers to						
	······································	Office Account \$ , ,						
Tota	al Monetary \$ , , 35 . 00							
		Total Monetary \$, 35 . 00						
În-K	ind \$,,,							
		(8) Other Distributions						
		<b>5</b>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>40</u> , <u>952</u> . <u>00</u>	\$ , <u>13</u> , <u>158</u> <u>84</u>						
(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) JULIO BARINA	(Type name) KEITH QUACKENBUSH						
1 <del>-</del>	Individual (only for IE  Treasurer Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC and PTY)						
	r electioneering comm.)	(22)						
ý	Onla Barra	x /and						
	ignature	Signature						
	DE 12 (Rev. 11/13)	SEE REVERSE FOR INSTRUCTIONS						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number						
(3) Cover Period	07 / 20 / 24	through/	/	_ (4) Page	<u> </u>	of
(5)  Date (6)  Sequence Number	(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)	(12)
07 22 24 / / /	Waste Pro 13110 Rickenbacker Pkwy Fort Myers FL 33913	В	СНЕ	Description		\$35
1 1				Serve Server	a gare	
1 1						
1 1	,					
1 1						
1						
1 1						

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES