CAMPAIGN TREASURER'S REPORT SUMMARY CLERK										
(1)	Bruce G. Roberts	2017 USE ONLY: 44								
	Name									
(2)	2113 NE 64 Street									
	Address (number and street) Fort Lauderdale, FL 33308									
	City, State, Zip Code									
	☐ Check here if address has changed	(3) ID Number:								
(4)										
	<ul> <li>✓ Candidate Office Sought:</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>									
(5) Report Identifiers										
Cove	er Period: From <u>09</u> / <u>01</u> / <u>2016</u> To	09 / 30 / 2016 Report Type: M9								
<b>V</b> 0	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$ , , <u>700</u> . <u>00</u>	Monetary Expenditures \$ , , _000								
Loar	s \$,,	Transfers to Office Account \$ , ,								
Tota	Monetary \$ , , 700 . 00	Total Monetary \$, 0 . 00								
In-Ki	nd \$ , ,									
Sandara por de alfre Andrea		(8) Other Distributions \$ , ,								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$ , <u>2</u> , <u>400</u> . <u>00</u>	\$ , , <u>0</u> . <u>00</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:										
	<sub>/pe name)</sub> Anthony Brunson	<sub>(Type name)</sub> Bruce G. Roberts								
or X	Individual (only for IE  Treasurer Deputy Treasurer electioneering comm	✓ Candidate ☐ Chairperson (only for PC and PTY)								
	gnature	Signature								

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	G. Roberts		(2) I.D. Number						
(3) Cover Period	09 / 01 / 2016	throu	gh/	30 / 2016 /	_ (4) Page	1	of		
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor	(9) Contribution Type	(10) In-kind Description	(11)	(12)		
09 01 2016 / /	Thomas L La Salle 5100 N Ocean Blvd Apt. 1418 Laud By Sea, FL 33308-3015		Retired	.,,-			\$250.00		
09 19 2016	Seymour Ferguson 2130 NW 104th Ave Pembroke Pines, FL 33026	I	Technology S				\$250.00		
09 19 2016	Donna Dice Richards 977 S.E. 10th Ct. Pompano Beach, FL 30060	I	Lab analysis				\$200.00		
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES