

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CALEB HENRY GUNTER  
 Name  
 (2) 1008 NE 11TH STREET  
 Address (number and street)  
FORT LAUDERDALE, FLORIDA 33304  
 City, State, Zip Code

OFFICE USE ONLY
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2016 SEP 12 PM 3:02

CITY CLERK

Check here if address has changed (3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):  
 Candidate Office Sought: City Commission District 1  
 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 08 / 01 / 2016 To 08 / 31 / 2016 Report Type: M8  
 Original  Amendment  Special Election Report

(6) **Contributions This Report**

Cash & Checks	\$ <u>0</u> , <u>00</u> , <u>00</u> . <u>00</u>
Loans	\$ <u>   </u> , <u>2</u> , <u>900</u> . <u>00</u>
Total Monetary	\$ <u>   </u> , <u>2</u> , <u>900</u> . <u>00</u>
In-Kind	\$ <u>0</u> , <u>00</u> , <u>00</u> . <u>00</u>

(7) **Expenditures This Report**

Monetary Expenditures	\$ <u>0</u> , <u>00</u> , <u>00</u> . <u>00</u>
Transfers to Office Account	\$ <u>0</u> , <u>00</u> , <u>00</u> . <u>00</u>
Total Monetary	\$ <u>0</u> , <u>00</u> , <u>00</u> . <u>00</u>

(8) **Other Distributions**  
 \$ 00 , 00 , 00 .00

(9) **TOTAL Monetary Contributions To Date**  
 \$     , 2 , 900 .00

(10) **TOTAL Monetary Expenditures To Date**  
 \$ 00 , 00 , 00 .00

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

X John Smith  
 Signature

(Type name) CALEB HENRY GUNTER  
 Candidate  Chairperson (only for PC and PTY)

X [Signature]  
 Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** CALEB HENRY GUNTER

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

**(3) Cover Period** 08 / 01 / 2016 through 08 / 31 / 2016

**(4) Page** 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
08 / 15 / 2016	CALEB HENRY GUNTER 4601 NE 25TH AVE FORT LAUDERDALE, FLORIDA 33308	S	BUSINESS MAN	LOAN			\$2,900
M8							
/ /							
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