

## CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

CITY CLERK

2017 JAN -6 PM 2:36

(1) JIM LEWIS  
Name

(2) 200 SE 65th SUITE 301  
Address (number and street)

FOR LAUDERDALE, FL 33301  
City, State, Zip Code

Check here if address has changed

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

(4) Check appropriate box(es):

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Candidate  | Office Sought: <u>FOR LAUDERDALE MAYOR</u> | <input type="checkbox"/> Check here if PC or ECO has disbanded                 |
| <input type="checkbox"/> Political Committee (PC)  |  | <input type="checkbox"/> Check here if PTY has disbanded                       |
| <input type="checkbox"/> Electioneering Communications Org. (ECO)  |  | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input type="checkbox"/> Party Executive Committee (PTY)   |  |  |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) |  |  |

### (5) Report Identifiers

Cover Period: From 12 / 1 / 16 To 12 / 31 / 16 Report Type: M II

Original       Amendment       Special Election Report

### (6) Contributions This Report

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

### (7) Expenditures This Report

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

### (8) Other Distributions

\$ 0 , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 2,650 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , 1,780 . 45

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

X \_\_\_\_\_  
Signature

(Type name) JIM LEWIS  
 Candidate     Chairperson (only for PC and PTY)

X \_\_\_\_\_  
Signature

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

(1) Name JIM LEWIS (2) I.D. Number \_\_\_\_\_

(3) Cover Period 12 / 1 / 16 through 12 / 31 / 16 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
/ /		NONE						
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