

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Benjamin "Ben" Sorensen

Name

(2) 701 Se 7th Street

Address (number and street)

Fort Lauderdale, FL 33301

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

CITY CLERK

2017 JAN -3 PM 2:11

(4) Check appropriate box(es):

Candidate Office Sought: Ft Lauderdale City Commission, District IV

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

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

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . _____

Loans \$ _____, _____, 0 . _____

Total Monetary \$ _____, _____, 0 . _____

In-Kind \$ _____, _____, 0 . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0 . _____

Transfers to Office Account \$ _____, _____, 0 . _____

Total Monetary \$ _____, _____, 0 . _____

(8) Other Distributions

\$ _____, _____, 0 . _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,950 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 889 . 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) Golden Johansson

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

X Golden Johansson
Signature

(Type name) Benjamin Sorensen

Candidate Chairperson (only for PC and PTY)

X Benjamin Sorensen
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Benjamin "Ben" Sorensen (2) I.D. Number N/A

(3) Cover Period 12 / 01 / 2016 through 12 / 31 / 2016 (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
/ /	Nothing to report						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Benjamin "Ben" Sorensen

(2) I.D. Number N/A

(3) Cover Period 12 / 01 / 2016 through 12 / 31 / 2016

(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					
/ /	None				
/ /					
/ /					
/ /					
/ /					
/ /					