

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JIM LEWIS
Name

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

FOR LANDERDALE FL 33301
City, State, Zip Code

CITY CLERK
OFFICE USE ONLY

2017 MAR -3 PM 1:29

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: FOR LANDERDALE MAYOR

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 2/1/17 To 2/28/17 Report Type: M13

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0,000.00

Loans \$ 0,000.00

Total Monetary \$ 0,000.00

In-Kind \$ 0,000.00

(7) Expenditures This Report

Monetary Expenditures \$ 0,000.00

Transfers to Office Account \$ 0,000.00

Total Monetary \$ 0,000.00

(8) Other Distributions
\$ 0,000.00

(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]
Signature

(Type name) JIM LEWIS

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JIM LEWIS (2) I.D. Number _____

(3) Cover Period 2/1/17 through 2/28/17 (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
(6) Sequence Number		Type	Occupation	Type	Description		
/ /	None						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Jim Lewis

(2) I.D. Number _____

(3) Cover Period 2/1/17 through 2/28/17

(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
1/1	NONE				
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					