CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	CALEB HENRY GUNTER	OFFICE USE ONLY							
<b>.</b>	Name								
(2)	101 South East 6th ave, Ste11 Address (number and street)	<b>C</b> ITY CLERK							
	Pompano , FLORIDA 33060	2017 MAY -8 PM 3: 05							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:							
(4)	DISTRICT 1 Commissioner								
	<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> </ul> Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed								
(5) Report Identifiers									
Cove	r Period: From <u>0 4</u> / <u>01</u> / <u>2017</u> To	04 / 30 /2017 Report Type: M4							
Or Or	iginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , ,		Monetary							
Loans \$,,		Transfers to Office Account \$ , , .							
Total Monetary \$ , ,									
In-Kind \$ , , .		Total Monetary \$ , , 250 .00							
		(8) Other Distributions							
		\$ , ,							
(9) TOTAL Monetary Contributions To Date \$ , 5 , 250 00		(10) TOTAL Monetary Expenditures To Date \$ , 3 _ , 54063							
	(11) Cert	ification							
Loc	It is a first degree misdemeanor for any personality that I have examined this report and it is true examined.								
	certify that I have examined this report and it is true, correct, and complete:								
	pe name) JOHN SMITH Individual (only for IE ☑ Treasurer ☐ Deputy Treasurer	(Type name) CALEB HENRY GUNTER  ☑ Candidate ☑ Chairperson (only for PC and PTY)							
	lectioneering comm.)	John John Composition (Comprise of Comprise of Compris							
X	John St	X/1/1							
Signature		Signature							

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

(1) Name	CALEB HENRY GUNTER	(2) I.D. Number			
(3) Cover Period	<sup>04</sup> / <sup>01</sup> / <sup>2017</sup> through <sup>04</sup>	30 / 2017	(4) Page	$^{1}$ of _	1
	(7)	(0)	(0)	(10)	(11)

(5)	(7)	(8)	(9)	(10)	(11)
Date  (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
04 /26 /17	JOHN SMITH 101 Se 6th Ave,Ste 11 Pompano, Florida 33060		MONETARY		\$250.00
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