

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **CALEB HENRY GUNTER**

Name

(2) **P.O. Box 39326**

Address (number and street)

Fort Lauderdale, Florida 33339

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: **District 1 Commissioner**

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

OFFICE USE ONLY

CITY CLERK

2017 JUN -8 PM 3: 09

(5) Report Identifiers

Cover Period: From 05 / 01 / 2017 To 05 / 31 / 2017 Report Type: M5

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 500 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 500 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 56 . 00

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

Total Monetary \$ _____ , _____ , 56 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 5 , 750 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 3 , 596 . 63


(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 

Signature

(Type name) **CALEB HENRY GUNTER**

Candidate Chairperson (only for PC and PTY)

X 

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name CALEB HENRY GUNTER (2) I.D. Number _____

(3) Cover Period 05 / 01 / 2017 through 05 / 31 / 2017 (4) Page 1 of 1

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor | | (9) Contribution | (10) In-kind | (11) Amendment | (12) Amount |
|---------------------------|--|--------------------|------------|---------------------|-----------------|-------------------|----------------|
| (6) Sequence Number | | Type | Occupation | Type | Description | | |
| 05 / 15 / 2017 M 5 | MARLA & DAVID MAYMON 1710 MIDDLE RIVER DR FORT LAUDERDALE, FLORIDA 33305 | 1 | | CHECK | | | \$ 250 |
| 05 / 22 / 2017 M 5 | CLAY UPHAM DAVIS 2006 FERDINAND STREET CORAL GABLES, FL 33134 | 1 | | CHECK | | | \$ 250 |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CALEB HENRY GUNTER

(2) I.D. Number _____

(3) Cover Period 05 / 01 / 2017 through 05 / 31 / 2017

(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 |
|--------------|--|--|----------------------------|-------------------|----------------|
| 05 / 19 / 17 | UNITED STATES POSTAL SERVICE 3296 N Federal Hwy, Fort Lauderdale, FL 33306 | | MONETARY | | \$56.00 |
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