

# CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK

**(1) CALEB HENRY GUNTER**

Name

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

Address (number and street)

Fort Lauderdale, FL 33339

City, State, Zip Code

Check here if address has changed

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

OFFICE USE ONLY

2017 AUG -9 PM 4: 25

**(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

### (5) Report Identifiers

Cover Period: From 07 / 01 / 2017 To 07 / 30 / 2017 Report Type: M7

Original       Amendment       Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 250 . 00

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 250 . 00

### (8) Other Distributions

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

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 5 , 750 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , 4 , 346 . 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** John Smith  
Signature

(Type name) CALEB HENRY GUNTER

Candidate     Chairperson (only for PC and PTY)

**X** Caleb Henry Gunter  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CALEB HENRY GUNTER

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 01 / 2017 through 07 / 31 / 2017

(4) Page \_\_\_\_\_ of \_\_\_\_\_

(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					
7 / 10 / 2017	JOHN SMITH 101 SE 6TH AVE, APT 11 POMPANO BEACH, FLORIDA 33060		Check	Monetary	\$ 250