CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Walter Duke Campaign	OFFICE USE ONLY					
Name						
(2) 901 Southeast 5th Court						
Address (number and street)						
Fort Lauderdale, FL 33301						
City, State, Zip Code	200					
Check here if address has changed	(3) I.D. Number: 00000					
(4) Check appropriate box(es):	-0					
X Candidate (office sought): City of Fort Lauderdale Dis	strict 4					
Political Committee (PC)	ack here if PC or ECO has dishanded					
Electioneering Communications Org. (ECO)	eck here if PC or ECO has disbanded					
	eck here if PTY has disbanded					
	eck here if no other IE or EC reports will be filed					
individual making electioneering communications)						
(5) REPORT I	IDENITICIEDS					
Cover Period: From <u>07/01/2017</u> To <u>07/30/2017</u>	Report Type: M7					
X Original Amendment Special Elect	tion Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks\$2,000.00_	Monetary Expenditures \$318.00					
Loans\$0.00_	Transfers to Office Account \$0.00					
Total Monetary\$2,000.00	Total Monetary\$318.00					
In-Kind\$0.00_	(8) Other Distributions\$0.00_					
(9) TOTAL Monetary Contributions to Date	(10) TOTAL Monetary Expenditures to Date					
\$70,825.00	\$7,910.15					
(11) CERTI	FICATION					
It is a first degree misdemeanor for any perso						
I certify that I have examined this report and it is true, correct ar	nd complete:					
A Line Duka	/ / W. k D. Duller, III					
Lisa Duke	Walter B. Duke, III					
Individual (only for IE of X Treasurer Deputy Treasurer electioneering commy).	X Candidate Chairman (only for PC and PTY)					
LA C. A.						
X / Juneal succe	X					
Signature	Signature					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

	Walter Duke Campaign	STATE OF THE STATE			Number	00000	
(3) Cover Perio	od 07/01/2017 - 07/30/2017			(4) Pag	je	1 of 1	
(5) Date	(7)		(8)	(9)	(10)	(11)	(12)
(6)	Full Name (Last, Suffix, First, Middle)	Contributor		0 17 5	In-kind		
Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	Description	Amendment	Amount
07/12/2017	Brown, Angela 2050 King Arthur Circle Maitland, FL 32751-0000	I	Appraiser	CHE		~	\$ 250.00
1							
07/19/2017	Fernandez, Gloria 3831 SW 56 Street Fort Lauderdale, FL 33312-0000	1	Broker	CHE			\$ 250.00
2							
07/21/2017	Wise, Seth 2719 Juniper Lane Davie, FL 33330-0000	Ī	Business Executive	CHE			\$ 250.00
3							
07/21/2017	Levan, Jarret PO Box 39002 Fort Lauderdale, FL 33303-0000	1	Business Executive	CHE			\$ 250.00
4							
07/21/2017	Procacci, Phillip 95 S Federal Highway Boca Raton, FL 33432-0000	Ī	Business Owner	CHE			\$ 250.00
5							
07/21/2017	Levan, Alan PO Box 39002 Fort Lauderdale, FL 33303-0000	l	Business Executive	CHE			\$ 250.00
6							
07/21/2017	Abdo, John 1350 NE 56 Street Fort Lauderdale, FL 33334-0000	I	Business Executive	CHE			\$ 250.00
7							
07/28/2017	Hooper, Alan	ı	Construct	CHE			\$ 250.00

ion

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2719 NE 37 Drive

Fort Lauderdale, FL 33308-0000

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name	Walter Duke Campaign		(2) I.D. Number	00000	
(3) Cover Perio	3) Cover Period07/01/2017 - 07/30/2017			1 of 1	
(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
07/07/2017	Clay Wieland Photography 513 SE 9th Avenue Fort Lauderdale, FL 33301-0000	Photography	MON		\$ 318.00
1					
				2	
					7

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name	Walter Duke Campaign	(2) I.D. Number00000			
(3) Cover Perio	od 07/01/2017 - 07/30/2017	(4) Page0 of 0			
(5)	(7)	(8)	(9)	(10)	(11)
Date (6)	Full Name (Last, Suffix, First, Middle)	Purpose			
(6) Sequence Number	Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Related Expenditures	Amendment	Amount
	Nothing to report on the	his form			
v –					
	1		1		

CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS

(1) Name	Walter Duke Campaign	(2) I.D. Number	00000		
(3) Cover Perio	od 07/01/2017 - 07/30/2017		(4) Page	0 of 0	
(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Name of Financial Institution Street Address & City, State, Zip Code	Transfer Type	Nature of Account	Amendment	Amount
	Nothing to report on thi	s form			