

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Donna Guthrie
Name

(2) 401 SW 31 Avenue
Address (number and street)

Atlanta, GA 30312
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK

2017 OCT -2 PM 1:25

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: _____
- 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 09/01/17 To 09/30/17 Report Type: m-9

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 575.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, _____

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 575.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, _____

(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) Christine Jones

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Christine Jones

(Type name) Donna Guthrie

Candidate Chairperson (only for PC and PTY)

X [Signature]

(1) Name DONNA Guthrie

(2) I.D. Number _____

(3) Cover Period 09/01/17 through 09/30/17

(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	Amendment	Amount
9, 01, 17	Guthrie, Donna						
001	401 SW 37 Ave Ft. Laud., FL 33312	S		CHE			\$100.00
9, 01, 17	Jones, Christine						
002	1600 NW 15 PL Ft. Laud., FL 33311		Ret	CHE			\$100.00
8, 28, 17	Bunting, Leon						
003	6433 NW 52 CT Lauderhill, FL 33319	I		CHE			\$150.00
8, 14, 17	Riley, Timothy						
004	3837 Turtle Run Blvd. #2595 CORAL SPRING, FL 33067			CHE			\$25.00
8, 16, 17	ISAAC, Wilda						
005	2640 Manning Bny DR. E. #201 Ft. Laud., FL 33312			CHE			\$150.00
9, 29, 17	Jones, Christine						
006	1600 NW 15 PL Ft. Laud., FL 33311	I	RET	CHE			\$150.00
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