

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ed Rebholz Campaign
 Name
 (2) 1625 SE 14th Street
 Address (number and street)
Fort Lauderdale, FL 33316
 City, State, Zip Code

OFFICE USE ONLY

CITY OF FORT LAUDERDALE
 CITY CLERK'S OFFICE
 2023 FEB - 6 AM 11:51

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: City Commission Fort Lauderdale, District 4
 Political Committee (PC)
 Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) Check here if PTY has disbanded
 Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 11 / 04 / 2022 To 12 / 31 / 2022 Report Type: TR

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 95 . 88

Transfers to Office Account \$ _____ , _____ , _____ . 00

Total Monetary \$ _____ , _____ , 95 . 88

(8) Other Distributions
 \$ _____ , _____ , _____ . 00

(9) TOTAL Monetary Contributions To Date
 \$ _____ , 113 , 951 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , 113 , 951 . 00

(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) Roderick Harvey CPA, CVA

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

X _____
 Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ed Rebolz Campaign

(2) I.D. Number _____

(3) Cover Period 12 / 01 / 2022 through 12 / 31 / 2022

(4) Page 1 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					
12 / 31 / 2022	Seacoast Bank 12 SE 7th Street Fort Lauderdale, FL 33301		Bank Fees		\$95.88
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