

**CITY OF FORT LAUDERDALE
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) JOHN CHARLES HERBST

Name

(2) [REDACTED]

Address (number and street)

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

2023 FEB 10 10:05 AM
OFFICE USE ONLY
CITY CLERK'S OFFICE

(4) Check appropriate box(es):

- Candidate Office Sought: FORT LAUDERDALE CITY COMMISSION DISTRICT 1
- 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 01 / 01 / 2023 To 01 / 31 / 2023 Report Type: M1

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , 100 . 00

Total Monetary \$ _____ , _____ , 100 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 85 . 62

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

Total Monetary \$ _____ , _____ , 85 . 62

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 100 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 85 . 62

(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 CHARLES HERBST

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

X

Signature



(Type name) JOHN CHARLES HERBST

Candidate Chairperson (only for PC and PTY)

X

Signature



CITY OF FORT LAUDERDALE

2023 FEB 10 PM 2:59

CITY CLERK'S OFFICE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JOHN CHARLES HERBST (2) I.D. Number _____

(3) Cover Period 01 / 01 / 2023 through 01 / 31 / 2023 (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)	(12)
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
01 / 13 / 2023 1	HERBST, JOHN C. <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>	I	COMMISSIONER	LOAN			100.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JOHN CHARLES HERBST

(2) I.D. Number _____

(3) Cover Period 01 / 01 / 2023 through 01 / 31 / 2023

(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
(6) Sequence Number					
01 / 19 / 2023	BANK OF AMERICA PO BOX 15284 WILMINGTON, DE 19850	BANK SERVICE FEES	MON		85.62
1					