

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) John Tucker
Name

(2) 1826 Overlook Dr
Address (number and street)

Mount Dora FL 32757
City, State, Zip Code

OFFICE USE ONLY

06-01-16 A09:07 IN

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Mount Dora City Council Dist. 3
- 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 05 / 01 / 16 To 05 / 31 / 16 Report Type: 2016 MS

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 100.00

Loans \$ _____ , _____ , 200.00

Total Monetary \$ _____ , _____ , _____

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 71.10

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , _____

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 300.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 71.10

(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 Tucker

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 JOHN TUCKER (2) I.D. Number _____
 (3) Cover Period 05/06/16 through 05/31/16 (4) Page one 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
05/06/16	CITY OF MOUNT DORA 510 H. BAKER ST MOUNT DORA FL 32757		CAN		\$41.10
1					
05/13/16	SUPERVISOR OF ELECTIONS 315 W. MAIN ST. TAVARES FL 32778		CAN		\$10.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Tucker (2) I.D. Number _____

(3) Cover Period 05/01/16 through 05/31/16 (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		Amount
05/06/16	Tucker, John E 1826 Overlook Dr Mount Dora, FL 32757	S		LOA			200.00
05/19/16	Parent Muecker, Michael 2233 Overlook Dr Mount Dora FL 32757	I		CHE			100.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							