

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JAMES MURRAY
Name

(2) 1224 NORMANDY DR
Address (number and street)

MOUNT DORA FL 32757
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

10-28-16
9:34 AM

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: MOUNT DORA CITY COUNCIL DISTRICT 3
- 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 10 / 15 / 16 To 10 / 21 / 16 Report Type: G 6 2016

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ 0

Loans \$ _____ 0

Total Monetary \$ _____ 0

In-Kind \$ _____ 120.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ 0

Transfers to Office Account \$ _____ 0

Total Monetary \$ _____ 0

(8) Other Distributions

\$ _____ 0

(9) TOTAL Monetary Contributions To Date

\$ _____ 2,985.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 2,387.87

(11) Certification

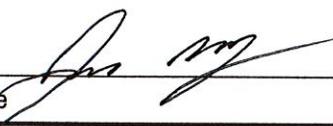
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) JAMES MURRAY

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

X

Signature 

(Type name) JAMES MURRAY

Candidate Chairperson (only for PC and PTY)

X

Signature 

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JAMES MURRAY (2) I.D. Number _____

(3) Cover Period 10 | 15 | 16 through 10 | 21 | 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
10 16 16	MURRAY, JAMES 1224 NORMANDY DR MOUNT DORA FL 32757	I			FARMERS MARKET BOOTH		\$20
1							
10 18 16	MURRAY, JAMES 1224 NORMANDY DR MOUNT DORA FL 32757	I			FLYERS PRINTING DEPOSIT		\$100
2							
1 1							
1 1							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JAMES MURRAY

(2) I.D. Number _____

(3) Cover Period 10 / 15 / 16 through 10 / 21 / 16

(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					
<u>1 / 1</u>	<u>/</u>				
<u>/</u>	<u>/</u>				
<u>1 / 1</u>	<u>/</u>	<i>NONE</i>			
<u>/</u>	<u>/</u>				
<u>1 / 1</u>	<u>/</u>				
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