

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JOHN TUCKER
Name

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

Mount Jara FL 32757
City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Mount Jara 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 08 / 26 / 16 To 09 / 02 / 16 Report Type: 2016-1

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . 00

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 3,578.83

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1,525.70

(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

(Type name) John Tucker

Candidate Chairperson (only for PC and PTY)

X John Tucker

Signature

X John Tucker

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

1) Name JOHN TUCKER

(2) I.D. Number _____

(3) Cover Period 08/26/16 through 09/02/16

(4) Page ONE of ONE

(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					
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No Activity

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JOHN TUCKER (2) I.D. Number _____

(3) Cover Period 08/26/14 through 09/02/16 (4) Page one of one

(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
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No Activity