	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Robert Graham Johnson	OFFICE USE ONLY					
` '	Name	ONLINE SUBMISSION					
(2)	4622 Crew Circle; #6	Submitted on:					
	Address (number and street)	4/8/2016 12:13:25 (eastern)					
	Melbourne, FL 32904						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:596					
(4)	Check appropriate box(es):						
	Candidate Office Sought: Supervisor of	Elections					
	Political Committee (PC)	Charlebone # DO av EOO has disbonded					
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	dentifiers					
Cove		3 / 31 / 2016 Report Type: M3					
		ecial Election Report					
		<u> </u>					
(6)	Contributions This Report	(7) Expenditures This Report					
Cash	h & Checks \$, , 55 . 00	Monetary					
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to					
warus go g	* 55 00	Office Account \$, , 0 . 00					
Tota	Monetary \$,, <u>55</u> . <u>00</u>	Total Manatania (h. 1907)					
~	*	Total Monetary \$, , 0 . 00					
In-Ki	ind \$,, <u>0</u> . <u>00</u>						
		(8) Other Distributions					
		\$, , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, <u>55</u> 00_	\$, , <u>0</u> . <u>00</u>					
	(11) Cert It is a first degree misdemeanor for any perso						
1		• • • • • • • •					
I certify that I have examined this report and it is true, correct, and complete:							
(T)	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Rol	oert Graham	John	son		(2	?) I.D. Number _		596		
	3/1/2016			3/31/	2016					
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1	

(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	5:314	(8) ontributor	(9) Contribution	(10) In-kind	(11)	(12)
Number 3/11/2016 // 1	City, State, Zip Code Duncan, John W 68 S, Atlantic Ave. #401 Cocoa Beach, F1 32931	Type	Occupation	Type CH	Description space coast bank check #4038	Amendment	Amount \$30.0
3/11/2016	King, Ebba K 2800 Fordham Rd NE Palm Bay, Fl 32905	I		СН	chase bank check #768		\$25.0
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(1) Name Robert	AMPAIGN TREASURER Graham Johnson	C	2) I.D. Number		596
(3) Cover Period _	3/1/2016 /through	3/31/2016	4) Page <u>1</u>	of _	0
(5) Date (6) Sequence Number	(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)	(11) Amount
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DS-DE 14 (Rev. 11/13)