

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Joseph B. Klosky

Name

(2) 960 Barefoot Bay Blvd.

Address (number and street)

Barefoot Bay, FL 32976

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 645

OFFICE USE ONLY

ONLINE SUBMISSION

[1114626]

Submitted on:

7/27/2016 16:01:24 (eastern)

(4) Check appropriate box(es):

☒ Candidate Office Sought: Barefoot Bay Trustee

☐ 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 7 / 9 / 2016 To 7 / 22 / 2016 Report Type: P3

☒ Original

☐ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 25 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 25 . 00

### (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)

☐ 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 CONTRIBUTIONS

(1) Name Joseph B. Klosky (2) I.D. Number 645

7/9/2016

7/22/2016

(3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (4) Page 1 of 1

[illegible]

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Joseph B. Klosky

(2) I.D. Number 645

(3) Cover Period 7/9/2016 through 7/22/2016

(4) Page 1 of 1

| (5)<br>Date      | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------|-------------------|----------------|
| 7/22/2016<br>/ / | klosky, joseph<br>960 Barefoot blvd<br>Barefoot Bay, FL 32976                                  | no expenses for<br>this period                                             | MO                         |                   | \$0.00         |
| 1                |                                                                                                |                                                                            |                            |                   |                |
| / /              |                                                                                                |                                                                            |                            |                   |                |
| / /              |                                                                                                |                                                                            |                            |                   |                |
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| / /              |                                                                                                |                                                                            |                            |                   |                |
| / /              |                                                                                                |                                                                            |                            |                   |                |
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| / /              |                                                                                                |                                                                            |                            |                   |                |