

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Concerned Citizens of Gainesville
 Name
 (2) 10715 SW 67th St
 Address (number and street)
Gainesville, Fl 32608
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1086587]

Submitted on:
 4/2/2015 21:38:48 (eastern)

Check here if address has changed

(3) ID Number: 410

(4) Check appropriate box(es):

- Candidate Office Sought: _____
- 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 3 / 13 / 2015 To 3 / 27 / 2015 Report Type: 15R1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 500 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 500 . 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

\$ _____ , _____ , 500 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 0 . 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 Concerned Citizens of Gainesville (2) I.D. Number 410

3/13/2015 through 3/27/2015

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

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
3/27/2015 / /	Powell, Rodger D 10715 sw 67th st gainesville, fl 32608	I	physician	CH			\$500.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Concerned Citizens of Gainesville

(2) I.D. Number 410

(3) Cover Period 3/13/2015 through 3/27/2015

(4) Page 1 of 0

(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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/ /					

CAMPAIGN TREASURER'S REPORT – CONTRIBUTOR SUMMARY

Covers all contributions for this election cycle through 2015-04-02 21:38:48

Name Concerned Citizens of Gainesville

I.D. Number

410

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Name/Address	Date	Contributor Type	Occupation	Contribution Type	In-Kind Description	Amendment	Amount
Contributor Subtotal							----- \$0.00
Powell, Rodger D 10715 sw 67th st gainesville, fl 32608	3/27/2015	I	physician	CH			\$500.00
Contributor Subtotal							----- \$500.00
LAST PAGE							