CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Curtis L. Smith	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	4457 Coquine Ridge Dr.	Submitted on:								
	Address (number and street) Melbourne, FL 32953	2/13/2015 15:47:19 (eastern)								
	City, State, Zip Code	<del></del>								
	Check here if address has changed	(3) ID Number: 477								
(4)	Check appropriate box(es):									
	Candidate Office Sought: County Commissioner, District 4  Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)  County Commissioner, District 4  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	dentifiers								
Cove	er Period: From 10 / 18 / 2014 To									
	riginal 🖾 Amendment 🗌 Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ , , ,000	Monetary								
Loar		Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$ , , 000	Total Monetary \$ , , 158 . 45								
In-Ki	and \$,, <u>0</u> .00									
		(8) Other Distributions \$ , , 000_								
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc									
(T	(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    Deputy Treasurer or electioneering comm.)  (Type name)  Candidate    Chairperson (only for PC and PTY)									
_X		<u>X</u>								
Si	gnature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Curtis L. Smith				2) I.D. Numbe	er <u>4</u>	:77
	10/18/2014 od//		1	0/30/2014	(4) Pag	je <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _	Curtis	L.	Smit	th				10-4100	(2	) I.D. Nur	nber	4	177	
		10/1	18/20	14		10/30	/2014	1						
(3) Cover P	eriod	1	<b>j</b> es !	1	through	1	1		(4	) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/20/2014	Pay Pal, 2211 N 1st St San Jose, Ca 95131	pay pal chgs	МО	Add	\$30.53
1 10/28/2014 / / 2	Address N Mail, 404 E New Haven Melbourne, FL 32901	mailing	МО	Add	\$127.92
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