	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Bob Harvey	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	29 Riverside Drive	Submitted on:								
	Address (number and street)	9/20/2016 10:26:02 (eastern)								
	Oite Otata 7ia Oada									
	City, State, Zip Code	(0) ID M								
	Check here if address has changed	(3) ID Number: 627								
(4)	Check appropriate box(es):									
	☐ Candidate Office Sought: Canaveral Por	t Authority, District 4								
	☐ 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								
		☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
	(5) Report	Identifiers								
Cove	er Period: From 9 / 3 / 2016 To	9 / 16 / 2016 Report Type: G2								
X o	riginal Amendment Spe	cial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
		Monetary								
Casł	n & Checks \$, , <u>350</u> . <u>00</u>	Expenditures \$, 3 , <u>277</u> . <u>26</u>								
	(
Loar	s , , 3 , <u>000</u> . <u>00</u>	Transfers to Office Account \$								
- .	\$ 2.250 00	Office Account \$, , , 0 . 00								
rota	I Monetary \$,3 , <u>350</u> . <u>00</u>	Total Monetary \$, 3 277 . 26								
I IZ:	nd \$, , 0.00	Total Monetary								
In-Ki	nα Ψ,, <u>σ</u> . <u>σσ</u>	(8) Other Distributions								
		(8) Other Distributions \$, 000_								
	****	,,,								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$								
	(44) 0 - (
	(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:										
		, 								
	ype name) Individual (only for IE	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)								
	electioneering comm.)	Gonali person (Unity for FO affor FTT)								
X		χ								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Harvey			(2) I.D. Number627							
	9/3/2016	5		9/16/	/2016						
(3) Cover Period		/	through	1	1	(4) Page	1	$_{-}$ of $_{-}^{1}$			

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(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C ₁	(8) ontributor	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
9/3/2016	Tiger Bay Club, PO Box 372262 Satellite Beach, Fl 32959		tiger bay club	RE	refund from hob nob,		\$350.00
9/3/2016	Harvey, Bob 29 Riverside Dr #601 Cocoa, Fl 32922	I	airline pilot	LO			\$3,000.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Bob Harvey							 (2) I.D. Nur	nber	627				
		9,	/3/20	16			9/1	16/20	16					
(3) Cover P	erio	ď	1	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
9/3/2016	Lewis,Longman & Walker Att, 315 S. Calhoun St Suite 830 Tallahassee, Fl 32301	attorney for recount	МО		\$1,500.00
9/3/2016	WMEL 1060 radio station, 2355 Pluckebaum Rd Cocoa, FL 32926	radio ads	МО		\$1,500.00
9/3/2016	Facebook, 1601 S. California Ave Palo Alto, CA 94304	marketing	МО		\$277.26
9/3/2016	US Post Office, 600 Florida Ave Cocoa, Fl 32922	stamps	PS		\$18.80
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