

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Bob Harvey
 Name

(2) 29 Riverside Drive
 Address (number and street)

,
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1131227]

Submitted on:
 10/17/2016 15:33:52 (eastern)

Check here if address has changed

(3) ID Number: 627

(4) Check appropriate box(es):

- Candidate Office Sought: Canaveral Port 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
- 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 8 / 26 / 2016 To 11 / 28 / 2016 Report Type: TRP

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

\$, 45 , 536 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 45 , 536 . 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 Bob Harvey (2) I.D. Number 627

8/26/2016 through 11/28/2016

(3) Cover Period ___ / ___ / ___ through ___ / ___ / ___ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Bob Harvey

(2) I.D. Number 627

(3) Cover Period 8/26/2016 through 11/28/2016

(4) Page 1 of 1

(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					
10/17/2016 //	Harvey, Bob 29 Riverside Dr #601 Cocoa, FL 32922	remaining petty cash	DI	Add	\$0.00
1					
10/17/2016 //	Harvey, Bob 29 Riverside Dr #601 Cocoa, FL 32922	remaining petty cash	DI	Delete	\$248.10
2					
10/17/2016 //	Harvey, Bob 29 Riverside Dr #601 Cocoa, FL 32922	remaining petty cash	DI	Add	\$0.00
3					
//					
//					
//					
//					
//					

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Bob Harvey (2) I.D. Number 627

(3) Cover Period 8/26/2016 through 11/28/2016 (4) Page 1 of 1

(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) Related Expenditures	(10) Amendment	(11) Amount
10/17/2016	Harvey, Bob 29 Riverside Dr Cocoa, FL 32922	repayment of loan		Add	\$1,304.20
1					