CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Ryan Ross	OFFICE USE ONLY					
` '	Name	ONLINE SUBMISSION					
(2)	2540 NW 49 Terrace	[1113433] Submitted on:					
	Address (number and street)	7/15/2016 23:38:02 (eastern)					
	Coconut Creek, FL 33063						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 388					
(4)	Check appropriate box(es):						
	Candidate Office Sought: County Commission	sion, Dist. 2					
	Political Committee (PC)	Charlebone if DC av ECO has disbonded					
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cove		6 / 30 / 2016 Report Type: M6					
		ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cash	h & Checks \$, , <u>100</u> . <u>00</u>	Monetary					
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$					
Tato	Il Monetary \$, , 100 . 00	Office Account \$, , , 0 . 00					
างเล	Il Monetary \$,	Total Monetary \$. 0 . 00					
In-Ki	ind \$, , 0.00	Total Monetary \$, , 0 . 00					
In-Ki	nd	(9) Other Dietributions					
		(8) Other Distributions \$, , <u>0</u> 00					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, <u>100</u> 00	\$, , <u>0</u> . <u>00</u>					
	(11) Cert It is a first degree misdemeanor for any perso						
Ιc	certify that I have examined this report and it is true, corre						
(Type name) (Type name)							
	ype name) Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
х		V					
	gnature	X Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Ryan Ross			(2) I.D. Number					
	6/1/2016			/30/2016				
(3) Cover Perio	od//	thro	ough	1 1	(4) Pag	e ¹	of ¹	
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(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name		,				**************************************	
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
6/22/2016	Ross, Ryan	S		СН			\$100.0	
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) Name Ryan	6/1/2016 6/		2) I.D. Numbe	-	388
) Cover Period _	/through		4) Page <u>1</u>	of	0
(5) Date (6) Sequence Number	(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)	(11) Amount
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DS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES						