CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Bert B. Boldt II	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION [1183646]						
(2)	1039 Gulf Shore Blvd.	Submitted on:						
	Address (number and street)	2/3/2019 16:59:17 (eastern)						
	Alligator Point, FL 32346 City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 183						
(4)	Check appropriate box(es):							
	Candidate Office Sought: County Commission Dist. 2 Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) County Commission Dist. 2 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						
	er Period: From $11 / 2 / 2018$ To	2 / 4 / 2019 Report Type: TRG						
<u>X</u> 0	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						
	I Monetary \$,,	Total Monetary \$, , <u>832</u> . <u>93</u>						
In-Ki	and \$	(8) Other Distributions \$, , 000_						
(9) TOTAL Monetary Contributions To Date \$,10_, _22500								
(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 Candidate Chairperson (only for PC and PTY)								
X Si	gnature	X Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Bert B. Boldt II	(2) I.D. Number							
11/2/2018		2/4/2019							
(3) Cover Perio	od / /	thro	ough	1 1	(4) Pag	e	of		
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(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle) Street Address &			Cautaibotiau	Lee Liberal				
Sequence Number	City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
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DO-DE 19 (Kev. 11/13	, J.	SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Bert 1	B. Boldt	II			(2) I.D. Num	ber	-	183	
	11/2/2	018	2/4/2	1019	~ ~				
(3) Cover Period	1	1	through /	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
2/3/2019	BOLDT, BERT B 1039 GULF SHORE BLVD	reimburse expenses for	МО		\$832.93
1	ALLIGATOR POINT, Fl 32346	radio and sign instillation		-	
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DS-DE 14 (Rev.	11/13 \			<u> </u>	