

# CAMPAIGN TREASURER'S REPORT SUMMARY

**OFFICE USE ONLY**

(1) SAWYER C SMITH

Name

(2) P O BOX 39, FORT MYERS, FL 33902

Address (number and street)

City, State, Zip Code

Check here if address has changed

(3) ID Number: 757

(4) Check appropriate box(es):

Candidate Office Sought: COUNTY COMMISSIONER-4

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

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 Identifiers**

Cover Period: From 8/9/2014 To 8/21/2014 Report Type: P7

Original     Amendment     Special Election Report

**(6) Contributions This Report**

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .200.00

**(7) Expenditures This Report**

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .00

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .00

**(8) Other Distributions** 0.00  
\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .298,202.91

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ .263,931.01

**(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 SAWYER C SMITH (2) I.D. Number 757

(3) Cover Period 8/9/2014 /      /      through 8/21/2014 /      /      (4) Page 1 of 1

(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
8/20/2014 /    /	Herman, Sherry 5781 Cape Harbour Drive, #908 Cape Coral, FL 33914	I	general manager	INK	food & beverage	Add	\$200.00
1							
/    /							
/    /							
/    /							
/    /							
/    /							
/    /							
/    /							
/    /							
/    /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name SAWYER C SMITH

(2) I.D. Number 757

(3) Cover Period 8/9/2014 through 8/21/2014

(4) Page 1 of 0

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					