CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Augustus Aikens Jr	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1147691]							
(2)	P.O. Box 14272	Submitted on:							
	Address (number and street) Tallahassee, FL 32317	1/9/2018 14:35:53 (eastern)							
	City, State, Zip Code	<del></del>							
	Check here if address has changed	(3) ID Number: 506							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought: Leon County Judge - Seat 4</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
	(5) Report	Identifiers							
Cove	er Period: From <u>12</u> / <u>1</u> / <u>201</u> 7 To	12 / 31 / 2017 Report Type: M12							
X O	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , , 5000	Monetary							
Loar		Transfers to Office Account \$ , , , 0 . 00							
Tota	I Monetary \$ , , , 5000	Total Monetary \$ , , _10 . 00							
In-Ki	ind \$ , , ,0 . <u>00</u>								
		(8) Other Distributions \$ , , 000_							
(9)	TOTAL Monetary Contributions To Date \$ , 2 , _40000	(10) TOTAL Monetary Expenditures To Date \$ , , 54700							
(T	(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								
X		<u>X</u>							
Si	gnature	Signature							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Augustus Aikens Jr			(2) I.D. Number					
	12/1/2017			2/31/2017					
(3) Cover Pe	eriod / /	thro			(4) Page	1	of		
(5) Date	(7) Full Name	(8)  Contributor  Type Occupation		(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code			Contribution Type	In-kind Description	Amendment	Amount		
12/29/2017	Washington, Al P. O. Box 5173 Tallahassee, Fl `32314	I	Оссираноп	СН	Везоприон		\$50.0		
1	Tarranassee, F1 32314								
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Augustus	Aiker	ns Jr				 (2) I.D. Num	nber	5	506	
	12	2/1/20	17		12/31/	2017					
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
12/31/2017	Capital City Bank, 217 N. Calhoun Street Tallahassee, Fl 32301	service charge	MO		\$10.00
1				0	
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DS-DE 14 (Rev					