CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Augustus Aikens Jr	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	P.O. Box 14272	Submitted on:					
	Address (number and street)	10/10/2017 17:52:08 (eastern)					
	Tallahassee, FL 32317						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:506					
(4)	Check appropriate box(es):						
	Candidate Office Sought: Leon County J	udge - Seat 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	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cove	er Period: From 9 / 1 / 2017 To	9 / 30 / 2017 Report Type: M9					
⊠ o	riginal Amendment Spo	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
` '		Monetary					
Casl	n & Checks \$, , 250 . 00	Expenditures \$, , 12 . 00					
Loar	ns \$,,000	Transfers to					
		Office Account \$, , , 0 . 00					
Tota	I Monetary \$, , <u>250</u> . <u>00</u>						
		Total Monetary \$, , _12 . 00					
In-Ki	ind \$, , 0 . <u>00</u>						
		(8) Other Distributions					
		\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, , 850 . 00	\$, ,, 517 . 00					
		tification on to falsify a public record (ss. 839.13, F.S.)					
l c	I certify that I have examined this report and it is true, correct, and complete:						
_(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name		(2) I.D. Number					
	9/1/2017			9/30/2017			
(3) Cover Perio	od///	thro			(4) Page	1	of ¹
			1000	v 		V-	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
9/7/2017	Cummings, Carolyn	I	attorney	СН			\$250.0
1	Davis 462 West Brevard Street						
	Tallahassee, FL 32301						
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Augustus Aikens Jr	(2) I.D. Number	506
9/1/2017	9/30/2017	
(3) Cover Period / / through	/ / (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
9/29/2017	Capital City Bank, P.O.Box 900	service charge	МО		\$12.00
1	Tallahassee, FL 32302				
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DS-DE 14 (Rev.	4440				