

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Akin Akinyemi  
Name

(2) 2100 Continental Ave Apt 2  
Address (number and street)

Tallahassee, FL 32304  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1130923]

Submitted on:  
10/14/2016 20:22:04 (eastern)

Check here if address has changed

(3) ID Number: 384

(4) Check appropriate box(es):

- Candidate Office Sought: Leon County Property Appraiser
- 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 individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 10 / 1 / 2016 To 10 / 7 / 2016 Report Type: G4

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 100 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 100 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 8 . 20

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 8 . 20

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 14 , 615 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      , 12 , 138 . 22

### (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 EXPENDITURES**

(1) Name Akin Akinyemi

(2) I.D. Number 384

(3) Cover Period 10/1/2016 through 10/7/2016

(4) Page 1 of 1

(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					
10/5/2016 / /	Piryx Inc, 580 Howard St #402 San Francisco, CA 94105	service fee	MO		\$8.20
1					
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