

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Luther Lee  
 Name  
 (2) 410 Victory Garden Dr.  
 Address (number and street)  
Tallahassee, FL 32301  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1123880]  
 Submitted on:  
 8/26/2016 16:55:44 (eastern)

Check here if address has changed

(3) ID Number: 393

(4) Check appropriate box(es):

- Candidate Office Sought: Tallahassee City Commission - Seat 1
- 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 8 / 13 / 2016 To 8 / 25 / 2016 Report Type: P7

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 3 . 37

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 3 . 37

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 1 , 056 . 23

### (10) TOTAL Monetary Expenditures To Date

\$        , 1 , 056 . 23

### (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 Luther Lee (2) I.D. Number 393

(3) Cover Period 8/13/2016 through 8/25/2016 (4) Page 1 of 0

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

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Luther Lee

(2) I.D. Number 393

(3) Cover Period 8/13/2016 through 8/25/2016

(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					
8/25/2016 //	DonorBox.org, 620 Folsom St #100 San Fransisco, CA 94107	donation processing fee	MO	Add	\$3.37
1					
//					
//					
//					
//					
//					
//					
//					