

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Alan Williams  
 Name  
 (2) P. O. Box 10169  
 Address (number and street)  
Tallahassee, FL 32302  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1135439]

Submitted on:  
 11/10/2016 15:21:21 (eastern)

Check here if address has changed

(3) ID Number: 423

(4) Check appropriate box(es):

- Candidate Office Sought: Leon County Supervisor of Elections
- 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 / 22 / 2016 To 11 / 3 / 2016 Report Type: G7

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 \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 193 , 188 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 178 , 262 . 57

### (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 Alan Williams (2) I.D. Number 423  
 10/22/2016 through 11/3/2016  
 (3) Cover Period / / through / / (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
(6) Sequence Number						
11/1/2016 / /	Brown, Audrey 3713 Foxford Circle Tallahassee, FL 32309	I florida health plans	CH		Delete	\$250.00
1						
11/1/2016 / /	Brown, Audrey 3713 Foxford Circle Tallahassee, FL 32309	I trade assoc. exec.	CH		Add	\$250.00
2						
11/2/2016 / /	Lettman, Sharon 6304 Mallard Trace Drive Tallahassee, FL 32312	I civil rights leader	CH		Delete	\$250.00
3						
11/2/2016 / /	Lettman, Sharon 6304 Mallard Trace Drive Tallahassee, FL 32312	I civil rights org. dir.	CH		Add	\$250.00
4						
11/2/2016 / /	Watkins, Mike 3170 Dunbar Lane Tallahassee, FL 32311	I foster care nonprofit	CH		Delete	\$250.00
5						
11/2/2016 / /	Watkins, Mike 3170 Dunbar Lane Tallahassee, FL 32311	I nonprofit org. exec.	CH		Add	\$250.00
6						
/ /						
/ /						

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

(1) Name Alan Williams

(2) I.D. Number 423

(3) Cover Period 10/22/2016 through 11/3/2016

(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					
10/28/2016 / /	Election Campaign Management, Solutions, LLC 1779 N. University Drive Suite 102 Tallahassee, FL 33024	credit card processing fee	MO	Delete	\$10.10
1					
10/28/2016 / /	Election Campaign Management, Solutions, LLC 1779 N. University Drive Suite 102 Pembroke Pines, FL 33024	credit card processing fee	MO	Add	\$10.10
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					