

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Forrest Van Camp  
 Name  
 (2) 7766 Cornucopia Ln  
 Address (number and street)  
Tallahassee, FL 32309  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1110224]  
 Submitted on:  
 7/1/2016 07:35:07 (eastern)

Check here if address has changed

(3) ID Number: 472

(4) Check appropriate box(es):

- Candidate Office Sought: Leon County Superintendent of Schools
- 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 6 / 1 / 2016 To 6 / 24 / 2016 Report Type: P1

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        , 9 , 000 . 00

Total Monetary \$        , 9 , 000 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        , 8 , 153 . 14

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        , 8 , 153 . 14

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 9 , 000 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 8 , 153 . 14

### (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 Forrest Van Camp (2) I.D. Number 472

6/1/2016 through 6/24/2016

(3) Cover Period         /        /         through         /        /         (4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor |                     | (9)<br>Contribution | (10)<br>In-kind | (11)<br>Amendment | (12)<br>Amount |
|---------------------------|--|--------------------|---------------------|---------------------|-----------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  | Type               | Occupation          | Type                | Description     |                   |                |
| 6/7/2016<br>/ /           | Van Camp, Forrest<br>7766 Cornucopia Lane<br>Tallahassee, Fl 32309                             | S                  | retired<br>educator | LO                  |                 |                   | \$500.00       |
| 1                         |  |                    |                     |                     |                 |                   |                |
| 6/17/2016<br>/ /          | Van Camp, Forrest<br>7766 Cornucopia Lane<br>Tallahassee, Fl 32309                             | S                  | retired<br>educator | LO                  |                 |                   | \$8,500.00     |
| 2                         |  |                    |                     |                     |                 |                   |                |
| / /                       |  |                    |                     |                     |                 |                   |                |
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Forrest Van Camp

(2) I.D. Number 472

(3) Cover Period 6/1/2016 through 6/24/2016

(4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  |  |                            |                   |                |
| 6/21/2016<br>/ /          | Supervisor of Elections,<br>P. O. Box 7357<br>Tallahassee, Fl 32314                            | qualifying fee   | MO                         |                   | \$8,022.54     |
| 1                         |  |  |                            |                   |                |
| 6/15/2016<br>/ /          | SunTrust,<br>3522 Thomasville Road<br>Tallahassee, Fl 32309                                    | checks for<br>account  | MO                         |                   | \$130.60       |
| 2                         |  |  |                            |                   |                |
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