

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Erik David  
 Name  
 (2) 4266 Slash Pine Lane  
 Address (number and street)  
Tallahassee, FL 32305  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1161122]  
 Submitted on:  
 7/13/2018 07:09:02 (eastern)

Check here if address has changed (3) ID Number: 500

(4) Check appropriate box(es):  
 Candidate Office Sought: Tallahassee City Commission - Seat 4/Mayor  
 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 7 / 7 / 2018 To 7 / 20 / 2018 Report Type: P3  
 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 \$        ,        , 60 . 00  
 Transfers to Office Account \$        ,        , 0 . 00  
 Total Monetary \$        ,        , 60 . 00

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        , 1 , 355 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        , 1 , 047 . 43

### (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 Erik David (2) I.D. Number 500

(3) Cover Period 7/7/2018 through 7/20/2018 (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
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Erik David

(2) I.D. Number 500

(3) Cover Period 7/7/2018 through 7/20/2018

(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
7/12/2018 //	David, Debbie 4266 Slash Pine Lane Tallahassee, FL 32305	contribution received after withdrawal	RE		\$25.00
1					
7/12/2018 //	Spencer, Troy 1936 West Indianhead Drive Tallahassee, FL 32301	contribution received after withdrawal	RE		\$25.00
2					
7/12/2018 //	Capital City Bank, PO Box 900 Tallahassee, FL 32302	account service charge	MO		\$10.00
3					
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