

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Joseph West
 Name

(2) PO Box 181284
 Address (number and street)
Tallahassee, FL 32318
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1161987]

Submitted on:
 7/21/2018 12:23:12 (eastern)

Check here if address has changed

(3) ID Number: 511

(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 \$, , 475 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 475 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 206 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 206 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 5 , 300 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 4 , 955 . 44

(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 Joseph West (2) I.D. Number 511
 (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) Contributor Type Occupation | | (9) Contribution Type | (10) In-kind Description | (11) Amendment | (12) Amount |
|---------------------------|--|---------------------------------------|------------|-----------------------------|--------------------------------|-------------------|----------------|
| (6) Sequence Number | | Type | Occupation | | | | |
| 7/9/2018 / / | Waugh, Nancy s 414 Vinnedge Tallahassee, Fl 32303 | I | | CH | | | \$50.00 |
| 1 | | | | | | | |
| 7/16/2018 / / | Trussell, Marianne A 2069 Wedgewood Dr Tallahassee, Fl 32317 | I | | CH | | | \$50.00 |
| 2 | | | | | | | |
| 7/16/2018 / / | Dafoe, Sandra 7477 Preservation Rd Tallahassee, Fl 32312 | I | retired | CH | | | \$250.00 |
| 3 | | | | | | | |
| 7/18/2018 / / | Ware, Barbara 4771 Buckhead Ct Tallahassee, Fl 32309 | I | | CH | | | \$25.00 |
| 4 | | | | | | | |
| 7/20/2018 / / | Minichiello, Anthony I 1039 Canarvon Dr Tallahasse, Fl 32303 | I | | CH | | | \$50.00 |
| 5 | | | | | | | |
| 7/20/2018 / / | Gee, Robert F POB 366 Saint Marks, Fl 32355 | I | | CH | | | \$50.00 |
| 6 | | | | | | | |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Joseph West

(2) I.D. Number 511

(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 |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6) Sequence Number | | | | | |
| 7/11/2018 // 1 | Full Press, Full Press Full Press 3445 Garber Dr Tallahassee, FL 32303 | go joe hats and tess | MO | | \$206.00 |
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