	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Leon Accurate Credible Elections (LA	
	Name	ONLINE SUBMISSION [1117143]
(2)	2202 Woodlawn Dr	Submitted on:
	Address (number and street)	8/4/2016 20:44:01 (eastern)
	Tallahassee, FL 32301	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number: 485
(4)	Check appropriate box(es):	
	Candidate Office Sought:	
	<ul><li>☒ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ Check here if PC or ECO has disbanded
	Party Executive Committee (PTY)	Check here if PTY has disbanded
		☐ Check here if no other IE or EC reports will be filed
	individual making electioneering communications)	
	(5) Report	dentifiers
Cove	er Period: From 7 / 23 / 2016 To	
× o	Priginal Amendment Sp	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
		Monetary
Casl	h & Checks \$ , , 0 . 00	Expenditures \$ , , 0 . 00
	Φ 0.00	
Loar	s , , , , 000	Transfers to Office Account \$
<b>-</b> .	0 00	Office Account \$ , , , 0 . 00
rota	I Monetary \$ , ,000	Total Monetary \$ . 0 . 00
L 12:	\$ 94 00	Total Monetary \$ , , , 0 . 00
In-Ki	ind \$ , , <u>94</u> . <u>00</u>	(9) Other Distributions
		(8) Other Distributions \$ , , 000_
		Ψ , , <u> </u>
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$	\$ , , <u>0</u> . <u>00</u>
	(4)	
		tification on to falsify a public record (ss. 839.13, F.S.)
Lo	certify that I have examined this report and it is true, con	
10	sering that thave examined this report and it is tide, con	ect, and complete.
	ype name)	(Type name)
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)
X		X
Si	gnature	Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Leon Accurate Cred	ible	Elections	(LACE)	(2) I.D. Numbe	er <u>4</u>	85	
(3) Cover Perio	7/23/2016 od////	thro	ough	/29/2016 //_	(4) Pag	je <u>1</u>	of	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8)		(9)	(10)	(11)	(12)	
7/28/2016	City, State, Zip Code Ausman, Jon M. 2202 Woodlawn Drive Tallahassee, FL 32303-3915	Type I	Occupation	Type IK	Description postage	Amendment	Amount \$94.	
1 1								
1 1								
j j								
1 1								
1 1								
1 1								
1 1								

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name	Leon	Accurate	e C	Credible Elec	tions	(LACE)		(2) I.D. Nun	nber_	4	185	300
		7/23/20	16		7/29/	2016			_			
(3) Cover Pe	eriod _		/_	through_			x	(4) Page	1	of	0	

(5) Date	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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