

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Walter Green  
 Name

(2) 19090 Saint Augustine DR  
 Address (number and street)

Dunnellon, FL 34432  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1125043]

Submitted on:  
 9/6/2016 16:10:58 (eastern)

Check here if address has changed (3) ID Number: 362

(4) Check appropriate box(es):

Candidate Office Sought: City Council- Seat 1 & Mayor-Dunnellon

Political Committee (PC)  Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO)  Check here if PTY has disbanded

Party Executive Committee (PTY)  Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

### (5) Report Identifiers

Cover Period: From 8 / 22 / 2016 To 11 / 24 / 2016 Report Type: TR-Q

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,      , 80 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 80 . 00

In-Kind \$      ,      , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      ,      , 64 . 20

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 64 . 20

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

**(9) TOTAL Monetary Contributions To Date**  
 \$      ,      , 80 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,      , 80 . 00

### (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 Walter Green (2) I.D. Number 362

8/22/2016 through 11/24/2016

(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
9/6/2016 / /	green, walter lee 19090 Saint Augustine Dr/ Dunnellon, fl 34432	I	retired	CH			\$80.00
1							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Walter Green

(2) I.D. Number 362

(3) Cover Period 8/22/2016 through 11/24/2016

(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					
9/6/2016 / /	city of dunnellon, 20750 River Drive dunnellon, fl 34431	elco  election qualifying fee	MO		\$63.00
1					
9/6/2016 / /	city of dunnellon, 20750 River Dr. dunnellon, fl 34431	petition verification	MO		\$1.20
2					
9/6/2016 / /	green, walter l 19090 Saint Augustine Dr. dunnellon, fl 34432	refund to candidate	DI		\$15.80
3					
/ /					
/ /					
/ /					
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