

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) EDDIE LEEDY  
 Name

(2) 14940 NE 180TH ST  
 Address (number and street)

FT MCCOY, FL 32134  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1142913]

Submitted on:  
 7/4/2017 19:43:15 (eastern)

Check here if address has changed

(3) ID Number: 378

(4) Check appropriate box(es):

- Candidate Office Sought: COUNTY COMMISSIONER - 4
- 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 / 2017 To 6 / 30 / 2017 Report Type: M6

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,   1   , 100 . 00

Loans \$      ,      ,   0 . 00

Total Monetary \$      ,   1   , 100 . 00

In-Kind \$      ,      ,   0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      ,   0 . 00

Transfers to Office Account \$      ,      ,   0 . 00

Total Monetary \$      ,      ,   0 . 00

### (8) Other Distributions

\$      ,      ,   0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,   4   , 250 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      , 570 . 76

### (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 EDDIE LEEDY (2) I.D. Number 378  
 (3) Cover Period 6/1/2017 through 6/30/2017 (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	Type	Description	Amendment	Amount
6/5/2017 / /	Investment, Mantis P.O. Box 741 Sparr, Fl 32192	B	business	CH			\$500.00
1							
6/8/2017 / /	Ocala, Tack Shack 481 SW 60th Ave. Ocala, Fl 34474-8503	B	business	CH			\$250.00
2							
6/8/2017 / /	Marketing, KHB Sales 1902 NW 56th Terr. Ocala, Fl 34482	B	business	CH			\$250.00
3							
6/16/2017 / /	Morgan, Robert 11003 SW 128th Ave Dunnellon, Fl 34432	I	retired	CH			\$100.00
4							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name EDDIE LEEDY

(2) I.D. Number 378

(3) Cover Period 6/1/2017 through 6/30/2017

(4) Page 1 of 0

(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					
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