	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Wilbert Theodore Holloway	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	748 NW 204 Street	Submitted on:								
	Address (number and street) Miami Gardens, Fl 33169	12/7/2015 16:17:35 (eastern)								
	City, State, Zip Code									
	☐ Check here if address has changed	(3) ID Number: 1429								
(4)	Check appropriate box(es):									
	Candidate Office Sought: School Board District 1 □ Political Committee (PC) □ Electioneering Communications Org. (ECO) □ Party Executive Committee (PTY) □ Independent Expenditure (IE) (also covers an individual making electioneering communications) □ Check here if PTY has disbanded □ Check here if no other IE or EC reports will be filed									
	(5) Report	dentifiers								
Cove	er Period: From <u>11</u> / <u>1</u> / <u>2015</u> To									
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , <u>550</u> . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , <u>550</u> . <u>00</u>	Total Manatany C								
In-Ki	ind \$,,, <u>0</u> 00	Total Monetary \$, , 0 . 00								
		(8) Other Distributions \$, , 000_								
(9)	(9) TOTAL Monetary Contributions To Date \$\\ _650 \cdot _00 \\ \$\\ _0 \cdot _00 \\ \$\\ _0 \cdot _00 \\ \$\\ _0 \cdot _00 \\ \$\\ _0 \cdot _00 \\ \$\\ _0 \cdot _00 \\ \$\\ \									
(T	(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									
	gnature	X Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameWilbe	ert Theo	dore Ho	olloway		(2)	I.D. Number		1429	126
(3) Cover Period	11/1/20	15 /	through	11/30 /)/2015 /	(4) Page	1	_ of _1	
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(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
11/3/2015	Navarro, Lubby 11840 SW 177 Terr Miami, FL 33177		executive director	СН	·		\$50.00
11/4/2015 /	Dade Assn. of School Administr, 1498 NE 2 nd Ave Ste 200 Miami, FL 33132	В	administra tors association				\$500.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Wilk	pert Theor	dore H	Holloway			(2) I.D. Number				(11)
(3) Cover Period	11/1/2 d/	015 /	through	11/30/2 /	015	(4) Pa	ge	1 of	0	
(E)		C	7)		(8)	Í	(9)	(10)		(11)

(5)	(7)	(8)	(9)	(10)	(11)
Date (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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DS DE 1/ /Pov					