| CAMPAIGN TREASURER'S REPORT SUMMARY                                                                                                                                                                                                                                                                            |                                                                 |  |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|--|--|--|--|--|--|
| (1) Earl Beaver                                                                                                                                                                                                                                                                                                | OFFICE USE ONLY                                                 |  |  |  |  |  |  |
| Name                                                                                                                                                                                                                                                                                                           | ONLINE SUBMISSION                                               |  |  |  |  |  |  |
| (2) 183 S.W. 3rd Court                                                                                                                                                                                                                                                                                         | Submitted on:                                                   |  |  |  |  |  |  |
| Address (number and street)<br>Florida City, FL 33034                                                                                                                                                                                                                                                          | 2/8/2016 16:05:23 (eastern)                                     |  |  |  |  |  |  |
| City, State, Zip Code                                                                                                                                                                                                                                                                                          |                                                                 |  |  |  |  |  |  |
| Check here if address has changed                                                                                                                                                                                                                                                                              | (3) ID Number: 1464                                             |  |  |  |  |  |  |
| (4) Check appropriate box(es):                                                                                                                                                                                                                                                                                 |                                                                 |  |  |  |  |  |  |
| <ul> <li>Candidate Office Sought: County Commission District 09</li> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul> |                                                                 |  |  |  |  |  |  |
| (5) Report Identifiers                                                                                                                                                                                                                                                                                         |                                                                 |  |  |  |  |  |  |
| Cover Period: From <u>1</u> / <u>1</u> / <u>2016</u> To                                                                                                                                                                                                                                                        | 0 <u>1</u> / <u>31</u> / <u>2016</u> Report Type: <u>16M0</u> 1 |  |  |  |  |  |  |
| 🖾 Original 🗌 Amendment 🗌 Sp                                                                                                                                                                                                                                                                                    | ecial Election Report                                           |  |  |  |  |  |  |
| (6) Contributions This Report                                                                                                                                                                                                                                                                                  | (7) Expenditures This Report                                    |  |  |  |  |  |  |
| Cash & Checks \$ , , , 000                                                                                                                                                                                                                                                                                     | Monetary<br>Expenditures \$ , , , 0 . 00                        |  |  |  |  |  |  |
| Loans \$,, <u>100</u> . <u>00</u>                                                                                                                                                                                                                                                                              | Transfers to<br>Office Account \$,,,000                         |  |  |  |  |  |  |
| Total Monetary       \$                                                                                                                                                                                                                                                                                        | Total Monetary \$ , , , 0 . 00                                  |  |  |  |  |  |  |
| ······································                                                                                                                                                                                                                                                                         | (8) Other Distributions                                         |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                | \$,,000                                                         |  |  |  |  |  |  |
| (9) TOTAL Monetary Contributions To Date                                                                                                                                                                                                                                                                       | (10) TOTAL Monetary Expenditures To Date                        |  |  |  |  |  |  |
| \$, <u></u> , <u></u> , <u></u> 00                                                                                                                                                                                                                                                                             | \$,, <u>0</u> . <u>00</u>                                       |  |  |  |  |  |  |
| (11) Certification<br>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)                                                                                                                                                                                                                                                                                                    | (Type name)                                                     |  |  |  |  |  |  |
| ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)                                                                                                                                                                                                                              | Candidate Chairperson (only for PC and PTY)                     |  |  |  |  |  |  |
| X                                                                                                                                                                                                                                                                                                              | x                                                               |  |  |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                      | Signature                                                       |  |  |  |  |  |  |

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name <u>Earl Beaver</u> |                                                         |      |                        | (2) I.D. Number |             |            |          |  |  |
|-----------------------------|---------------------------------------------------------|------|------------------------|-----------------|-------------|------------|----------|--|--|
| 1/1/2016                    |                                                         |      | 1/31/2016              |                 |             |            |          |  |  |
| (3) Cover Per               | iod / /                                                 | thro | bugh                   | 11              | (4) Page    | e <u>1</u> | of       |  |  |
| (5)<br>Date                 | (7)<br>Full Name                                        | (8)  |                        | (9)             | (10)        | (11)       | (12)     |  |  |
| (6)<br>Sequence             | (Last, Suffix, First, Middle)<br>Street Address &       | C    | ontributor             | Contribution    | In-kind     |            |          |  |  |
| Number                      | City, State, Zip Code                                   | Туре | Occupation             | Туре            | Description | Amendment  | Amount   |  |  |
| 1/31/2016<br>/ /            | Beaver, Earl<br>183 sw 3rd ct<br>florida city, FL 33034 |      | restaurant<br>operator | LO              |             |            | \$100.00 |  |  |
| 1                           |                                                         |      |                        |                 |             |            |          |  |  |
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|                             |                                                         |      |                        |                 |             |            |          |  |  |

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

| (1) Name Earl      | CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES         ) Name <u>Earl Beaver</u> (2) I.D. Number 1464 |                                         |                    |           |        |  |  |  |
|--------------------|------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------|-----------|--------|--|--|--|
|                    | 1/1/2016<br>//through                                                                                      | 1/31/2016                               | (4) Page <u>1</u>  |           | 0      |  |  |  |
| (5)<br>Date<br>(6) | (7)<br>Full Name<br>(Last, Suffix, First, Middle)                                                          | (8)<br>Purpose<br>(add office sought if | (9)<br>Expenditure | (10)      | (11)   |  |  |  |
| Sequence<br>Number | Street Address &<br>City, State, Zip Code                                                                  | contribution to a candidate)            | Туре               | Amendment | Amount |  |  |  |
|                    |                                                                                                            |                                         |                    |           |        |  |  |  |
|                    |                                                                                                            |                                         |                    |           |        |  |  |  |
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