CAMPAIGN TREASURE	ER'S REPORT SUMMARY
(1) Noel Chandler Name 1007 SW 6th Ave	OFFICE USE ONLY ONLINE SUBMISSION [1154080] Submitted on:
Address (number and street) Okeechobee, FL 34974 City, State, Zip Code	5/7/2018 11:19:01 (eastern)
Check here if address has changed (4) Check appropriate box(es): ∑ Candidate Office Sought: County Commiss ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	(3) ID Number:
	t Identifiers
	4 / 30 / 2018 Report Type: M-4 ecial Election Report
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$, , 0 . 00	Monetary
Loans \$,,	Transfers to Office Account \$, , , 0 . 00
In-Kind \$	Total Monetary \$, , 0 . 00
	(8) Other Distributions \$, , 000_
(9) TOTAL Monetary Contributions To Date \$, , _20000	(10) TOTAL Monetary Expenditures To Date \$,,
It is a first degree misdemeanor for any personal lateral late	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY) X
Signature	Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name) Name Noel Chandler (2) I.D. Number							
4/1/2018 4/30/2018								
(3) Cover Peri	od//	throug			(4) Pag	je ¹	of ¹	
						27.5		
(5)	(7)	3)	3)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)		Mission (See S	O 171 1	Door Livering D			
Sequence Number	Street Address & City, State, Zip Code	Type O	ributor	Contribution Type	In-kind Description	Amendment	Amount	
0000 0000 000 000 0000 0000 0000 0000 0000	chandler , noel	S tr		IK	candidate		\$25.0	
4/1/2018	alton	dr	iver		petition			
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) Name Noel (Chandler	(2	D EXPENDITURES 2) I.D. Number 138		
) Cover Period _	4/1/2018 4/3 / through	_//(4) Page <u>1</u>	of _	0
(5) Date (6) Sequence Number	(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)	(11)
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