CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Bruce E. Vickers	OFFICE USE ONLY							
•	Name	ONLINE SUBMISSION							
(2)	4528 Reaves Road	Submitted on:							
	Address (number and street) Kissimmee, FL 34746	5/9/2019 09:22:05 (eastern)							
	City, State, Zip Code	<del></del>							
	☐ Check here if address has changed	(3) ID Number: 369							
(4)		(9) ID Number.							
(4)	Check appropriate box(es):  X Candidate Office Sought: Tax Collector								
	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							
	` ' '	Identifiers							
Cove	er Period: From 4 / 1 / 2019 To	4 / 30 / 2019 Report Type: M4							
X O	Priginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Cash	h & Checks \$,,	Expenditures \$ , , 0 . 00							
Loar	ns \$ , , 0.00	Transfers to							
LUai	, , , , , , , , , , , , , , , , , , , ,	Office Account \$ , , 0 . 00							
Tota	ll Monetary \$ , , 0 . 00	, , , , <u> </u>							
		Total Monetary \$ , , 0 . 00							
In-Ki	ind \$,, 5.00								
		(8) Other Distributions							
		\$ , , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
• •	\$,, <u>0</u> . <u>00</u>	\$,,,000							
	(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)								
١c	-	• • • • • • •							
I certify that I have examined this report and it is true, correct, and complete:									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
х		X							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Bruce E. Vickers	ers (2) I.D. Number								
	4/1/2019			/30/2019						
(3) Cover Perio	od//	thro			(4) Page	1	of $\frac{1}{}$			
VI.20 80			1995							
(5)	(7)		(8)	(9)	(10)	(11)	(12)			
Date	Full Name									
(6)	(Last, Suffix, First, Middle)									
Sequence	Street Address &		ontributor	Contribution	In-kind					
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount			
4/1/2019	Vickers, Bruce E	I		IK	copies of		\$5.0			
1, 1, 2017	4528 Reaves Road Kissimmee, Fl 32746				signature cards-home					
					copier					
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1 1										
1 1										
			I	I						

DS-DE 13 (Rev. 11/13 ) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Bruc	ce E.	Vicke	ers				(2) I.I	D. Numb	er	3	869	300
	4,	/1/201	9		4/30/20	)19			-			
(3) Cover Perio	d	I	1	through	1	1	(4) P	age	1	of	0	

(5)	(7)	(8)	(9)	(10)	(11)
(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
11					
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11					
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DS-DE 14 (Rev.	11/13 \	-			