	CAMPAIGN TREASURE	R'S REPORT SUMMARY									
( '	Brian Staver	OFFICE USE ONLY ONLINE SUBMISSION									
	Name 12896 Estate Garden Dr	[1145517]									
\ <del>-</del> /	Address (number and street)	Submitted on:									
	Jesley Chapel, FL 33545	10/16/2017 13:14:35 (eastern)									
_	City, State, Zip Code	— I									
	Check here if address has changed	(3) ID Number: 960									
(4) C	Check appropriate box(es):										
	<ul> <li>☐ Candidate Office Sought: School Board Member District 1</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>										
111	ndividual making electioneering communications)										
	(5) Report	Identifiers									
Cover	Period: From $\frac{7}{2}$ / $\frac{1}{2017}$ To	7 / <u>31</u> / <u>2017</u> Report Type: <u>M7</u>									
☐ Origi	ginal Amendment Spe	ecial Election Report									
(6) C	Contributions This Report	(7) Expenditures This Report									
Cash 8	& Checks \$,,, _000	Monetary									
Loans	\$	Transfers to Office Account \$ , , , 0 . 00									
	Monetary \$,,,000	Total Monetary \$ , , _50 . 00									
In-Kind	\$,, <u>0</u> . <u>00</u>										
		(8) Other Distributions \$ , , 000_									
• •	OTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
\$	, , <u>295</u> . <u>00</u>	\$, <u>120</u> . <u>00</u>									
l cert	(11) Certi It is a first degree misdemeanor for any perso tify that I have examined this report and it is true, corre	on to falsify a public record (ss. 839.13, F.S.)									
(Type	e name)	(Type name)									
☐ Ind	dividual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)									
X		X									
Signa	ature	Signature									

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Brian Staver				2) I.D. Numbe	er <u>9</u>	060
	7/1/2017 od/////	thro	ough	/31/2017 //	(4) Pag	e <u>1</u>	of
(5) (7)  Date Full Name  (6) (Last, Suffix, First, Middle)  Sequence Street Address &  Number City, State, Zip Code		Co Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name	Brian	Staver							 (2) I.D. Nur	nber	9	960	
		7/1/20	17			7/31/	201	7					
(3) Cover P	eriod	1		1	through	1		1	(4) Page	1	of	1	

(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
7/11/2017	supervisor of elections, p.o. box 300 Dade City, fl 33526-0300	petition verification	MO	Add	\$50.00
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