

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

(1) Susan Lee Barber

Name

(2) 55 5th Street NW

Address (number and street)

Winter Haven, FL 33881

City, State, Zip Code

Check here if address has changed

(3) ID Number: 34

(4) Check appropriate box(es):

Candidate Office Sought: County Judge Group 8

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 26 / 2016 To 11 / 28 / 2016 Report Type: TR

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 14 , 134 . 11

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 14 , 134 . 11

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 126 , 342 . 80

(10) TOTAL Monetary Expenditures To Date

\$, 126 , 342 . 80

(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 or electioneering comm.) Treasurer Deputy Treasurer

X

Signature

(Type name)

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Susan Lee Barber (2) I.D. Number 34

8/26/2016 through 11/28/2016

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Susan Lee Barber

(2) I.D. Number 34

(3) Cover Period 8/26/2016 through 11/28/2016

(4) Page 1 of 1

(5) Date	(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) Amendment	(11) Amount
9/7/2016 / /	Bevilacqua, Harriet 6306 Hickory Leaf Place Lakeland, Fl 33813	campaign coordination fee	MO		\$3,000.00
1					
10/14/2016 / /	Advantage Direct, 2300 Clarendon Boulevard Suite 303 Arlington, Va 22201	autocall fee for august 29	MO		\$548.90
2					
11/17/2016 / /	Barber, Susan Lee ***confidential *** ***, ** ***	partial repayment of loan	MO		\$10,585.21
3					
/ /					
/ /					
/ /					
/ /					
/ /					