	CAMPAIGN TREASURER'S REPORT SUMMARY					
(1)	H. Alexander Duncan	OFFICE USE ONLY				
	Name	ONLINE SUBMISSION				
(2)	P.O. Box 620092	Submitted on:				
	Address (number and street)	9/23/2016 18:16:37 (eastern)				
	Oviedo, FL 32762 City, State, Zip Code	— I				
	Check here if address has changed	(3) ID Number:307				
(4)	_	(3) ID Number.				
(4)	Check appropriate box(es):  X Candidate Office Sought: County Commiss	sioner, District 5				
	Political Committee (PC)					
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded				
		<ul><li>☐ Check here if PTY has disbanded</li><li>☐ Check here if no other IE or EC reports will be filed</li></ul>				
	individual making electioneering communications)	Check here if the other in of need to be the will be thed				
		dentifiers				
Cove	rer Period: From 9 / 3 / 2016 To	9 / 16 / 2016 Report Type: <u>G2</u>				
X O	Original Amendment Spe	ecial Election Report				
(6)	Contributions This Report	(7) Expenditures This Report				
		Monetary				
Cash	h & Checks \$ , , <u>200</u> . <u>00</u>	Expenditures \$ , , 0 . 00				
Loar	ns \$ , , 0.00	Transfers to				
LUai	· · · · · · · · · · · · · · · · · · ·	Office Account \$ , , 0 . 00				
Tota	al Monetary \$ , , 200 . 00	, , , , <u> </u>				
		Total Monetary \$ , , 0 . 00				
In-Ki	ind \$ , , 0.00					
		(8) Other Distributions				
		\$,, <u>0</u> . <u>00</u>				
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
(0)	\$ , 8 , _796 36	\$ , 7 ,26088_				
	, <u> </u>	, , , , , , , , , , , , , , , , , , , ,				
	(11) Cert					
	It is a first degree misdemeanor for any person	• • • • • • •				
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:				
(T	Type name)	(Type name)				
	Individual (only for IE  Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)				
Х		X				
	ignature	Signature				

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name H. Alexander Duncan (2) I.D. Number 30							
	9/3/2016 od///	9	/16/2016				
(5) Date (6) Sequence Number	(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)	
9/6/2016	Nichols, Sandra 1321 KaRen Blvd. Capitol Heights, MD 20743	I computer specialist	CH			\$100	
9/6/2016	Coleman, Summetra 931 Dunloring Ct. Upper Marlboro, MD 20774	I postal service	СН			\$100	
1 1							
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1 1							
I I							

Date	Full Name		(0)	(9)	(10)	(T)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
Tamboi	Nichols, Sandra		computer	СН	Becompaign		\$100.00
9/6/2016	1321 KaRen Blvd. Capitol Heights, MD 20743		specialist				Ψ 200.00
1							
9/6/2016	Coleman, Summetra 931 Dunloring Ct. Upper Marlboro, MD 20774	I	postal service	СН			\$100.00
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1 1							
1 1							
1 1							
1 1							
1 1							3

Name H. Ale	CAMPAIGN TREASURER'S REPORT - ITEMIZALExander Duncan 9/3/2016 9/16/2016		(2) I.D. Number		
Cover Period _	//through	_///(4	4) Page <u>1</u>	of	0
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)
Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount
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//					
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