CAMPAIGN TREASURER'S REPORT SUMMARY									
(1) H. Alexander Du	ncan		OFFICE USE						
Name		ONLINE SUB	1						
(2) P.O. Box 620092			Submitted on:	1320]					
Address (number as Oviedo, FL 3276		12/3/2015 21:49:2	21 (eastern)						
City, State, Zip Cod		<del></del>							
Check here if add		(3)	ID Number:	307					
(4) Check appropriate b	oox(es):	. ,	-						
Candidate Office Sought: County Commissioner, District 5  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 1	1 / 1 / 2015 To		) / <u>2015</u> Repo	rt Type: <u>M11</u>					
	mendment Spe	ecial Election I	Report						
(6) Contributions This	Report	(7) Exp	enditures This Repo	rt					
Cash & Checks \$		Monetary Expenditure	es \$ ,	, <u>0</u> . <u>00</u>					
		Transfers to Office Acco	1 100	, <u>0</u> . <u>00</u>					
Total Monetary \$	, , <u>100</u> . <u>00</u>								
In-Kind \$		Total Mone	tary \$ ,	_ , <u>0</u> . <u>00</u>					
		(8) Oth	er Distributions	0. 00					
. ,	ontributions To Date , _10000	(10) TO	ΓAL Monetary Expend						
I certify that I have exami  (Type name)  ☐ Individual (only for IE or electioneering comm.)	(11) Certifice misdemeanor for any personed this report and it is true, correctly treasurer Deputy Treasurer	-	olete:	n (only for PC and PTY)					
X Signature	· · · · · · · · · · · · · · · · · · ·								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	H. Alexander Duncan		(2) I.D. Number								
	11/1/2015		1	1/30/2015							
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	e <u>1</u>	of				
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)				
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount				
11/2/2015	Duncan , H.Alexander PO Box 620092	S	2	LO			\$100.0				
1	Oviedo , FL 32762										
<i>f</i> 1											
1 1											
1 1											
Ĭ Ī											
<i>f 1</i>											
1 1	-										
J I											
DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES					

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

(1) Name H		Alexar	nder	Duncar	1	overy resimants		10000 00000	(2) I.D. Nun	nber		307	
-		11	/1/2	2015		11/30	/2015						
(3) Cover Pe	eric	od	_/		through _				(4) Page	1	of	0	

(5) Date	(7) Full Name	(8)	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
//					
//					
//					
//					
//					
//					
//					