

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Democratic Club of St. Lucie County  
 Name  
 (2) PO Box 9137  
 Address (number and street)  
Port St. Lucie, FL 34985  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1128121]  
 Submitted on:  
 9/26/2016 23:16:10 (eastern)

Check here if address has changed

(3) ID Number: 8

(4) Check appropriate box(es):

- Candidate Office Sought: \_\_\_\_\_
- 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

### (5) Report Identifiers

Cover Period: From 9 / 3 / 2016 To 9 / 16 / 2016 Report Type: G2

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      \$        ,        , 0 . 00

Transfers to Office Account      \$        ,        , 0 . 00

Total Monetary      \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 80 , 347 . 68

### (10) TOTAL Monetary Expenditures To Date

\$        , 82 , 247 . 47

### (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 Democratic Club of St. Lucie County (2) I.D. Number 8

9/3/2016 through 9/16/2016

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

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
9/16/2016 / /	Democratic Club of St Lucie Co, P.O. Box 9137 Port St Lucie, FL 34985	I		CA			\$0.00
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Democratic Club of St. Lucie County

(2) I.D. Number 8

(3) Cover Period 9/3/2016 through 9/16/2016

(4) Page 1 of 0

(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
(6) Sequence Number					
/ /					
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