

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Joseph E. Smith
 Name
 (2) 1639 B Laurel Leaf Ln.
 Address (number and street)
Fort Pierce, FL 34950
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1133696]
 Submitted on:
 10/31/2016 14:28:49 (eastern)

Check here if address has changed

(3) ID Number: 265

(4) Check appropriate box(es):

- Candidate Office Sought: Clerk of the Circuit Court
- 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 8 / 26 / 2016 To 9 / 2 / 2016 Report Type: G1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , -500.00

Loans \$, , 0.00

Total Monetary \$, , -500.00

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

\$, 38 , 260.00

(10) TOTAL Monetary Expenditures To Date

\$, 26 , 119.92

(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 Joseph E. Smith (2) I.D. Number 265
 8/26/2016 9/2/2016
 (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 Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
8/29/2016 / /	Flores, Gerard 118 NE Naranja Ave. Port St. Lucie, FL 34983	I	doctor	CH		Delete	\$200.00
1							
8/29/2016 / /	Flores, Gerard 118 NE Naranja Ave. Port St. Lucie, FL 34983	I	doctor	CH		Add	\$0.00
2							
8/29/2016 / /	Jones, Thom 9612 Crooked Stick Ln Port St. Lucie, FL 34986	I		CH		Delete	\$100.00
3							
8/29/2016 / /	Jones, Thom 9612 Crooked Stick Ln Port St. Lucie, FL 34986	I		CH		Add	\$0.00
4							
8/29/2016 / /	Straw, Allison 2350 49th Way N West Palm Beach, FL 33417	I		CH		Delete	\$100.00
5							
8/29/2016 / /	Straw, Allison 2350 49th Way N West Palm Beach, FL 33417	I		CH		Add	\$0.00
6							
8/27/2016 / /	Devling, Deborah 6168 NW Topaz Way Port St. Lucie, FL 34986	I		CH		Delete	\$100.00
7							
8/27/2016 / /	Devling, Deborah 6168 NW Topaz Way Port St. Lucie, FL 34986	I		CH		Add	\$0.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Joseph E. Smith

(2) I.D. Number 265

(3) Cover Period 8/26/2016 through 9/2/2016

(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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