	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Betty Jo Starke	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION [1105949]							
(2)	2510 S. 15th Street	Submitted on:							
	Address (number and street)	6/1/2016 17:00:33 (eastern)							
	Fort Pierce, FL 34982								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:266							
(4)	Check appropriate box(es):								
	Candidate Office Sought: County Commis	sioner, District 1							
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded							
	Party Executive Committee (PTY)	Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	Identifiers							
Cove	er Period: From 3 / 1 / 2016 To	3 / 31 / 2016 Report Type: M3							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(-)	осинизмено ино порег	Monetary							
Cash	n & Checks \$ , , 000	Expenditures \$ , , 0 . 00							
		· — · — · ,——							
Loar	ns \$,,,000	Transfers to							
		Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , 0 . <u>00</u>								
		Total Monetary \$ , , 0 . 00							
In-Ki	nd \$,, <u>0</u> . <u>00</u>								
		(8) Other Distributions							
		\$ , , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, _ 1 , 600 . 00	\$,1 ,59956_							
	(11) Cert It is a first degree misdemeanor for any pers	cification							
1									
I certify that I have examined this report and it is true, correct, and complete:									
_(T	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		X							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Betty Jo Starke				2) I.D. Numbe	er <u>2</u>	66
	3/1/2016 od////	thro	ough	/31/2016 ///	(4) Pag	e	of
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8)  ontributor  Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
/ /	Oity, State, 21p Code	Туре	Occupation	Туре	Description	Alleranen	Amount
J I							
1 1							
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name _B	etty	Jo	Star	ke		1			 (2) I.D. Nur	nber	2	266	and an analysis of the same an
		3/	1/201	16		3	/31/20	16		-			
(3) Cover Pe	eriod		1	1	throug	h	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
3/3/2016	Supervisor of Elections, 4132 Okeechobee Road Ft. Pierce, FL 34947	petitions	DV	Delete	\$75.20
1					
3/3/2016	Supervisor of Elections, 4132 Okeechobee Road Ft. Pierce, FL 34947	petitions	МО	Add	\$75.20
2					
//					
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