

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kim Johnson
 Name
 (2) 4888 Kings Highway; Box #407
 Address (number and street)
Fort Pierce, FL 34951
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1136401]
 Submitted on:
 11/27/2016 21:40:33 (eastern)

Check here if address has changed

(3) ID Number: 278

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner, District 5
- 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 5 / 1 / 2016 To 5 / 31 / 2016 Report Type: M5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , -35 . 15

Loans \$, , 0 . 00

Total Monetary \$, , -35 . 15

In-Kind \$, , 35 . 15

(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

\$, 11 , 835 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 9 , 818 . 67

(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 Kim Johnson (2) I.D. Number 278
 (3) Cover Period 5/1/2016 through 5/31/2016 (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		Type	Occupation				
5/9/2016 / /	Johnson, Kim 4888 Kings HWY Box 407 Fort Pierce, Fl 34951	I		CA	copies	Delete	\$11.72
1							
5/9/2016 / /	Johnson, Kim 4888 Kings HWY Box 407 Fort Pierce, Fl 34951	I		IK	copies	Add	\$11.72
2							
5/21/2016 / /	Johnson, Kim Individual 4888 Kings HWY Box 407 Fort Pierce, Fl 34951	I		CA	copies	Delete	\$23.43
3							
5/21/2016 / /	Johnson, Kim Individual 4888 Kings HWY Box 407 Fort Pierce, Fl 34951	I		IK	copies	Add	\$23.43
4							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kim Johnson

(2) I.D. Number 278

(3) Cover Period 5/1/2016 through 5/31/2016

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					