| CAMPAIGN TREASURER'S REPORT SUMMARY   |  |   |  |  |  |  |  |  |
|---|--|---|--|--|--|--|--|--|
| (1)   | Patrick Campion  | OFFICE USE ONLY   |  |  |  |  |  |  |
| (.,   | Name   | ONLINE SUBMISSION   |  |  |  |  |  |  |
| (2)   | 6030 Indrio Road, Apt. 2   | [1126368]   |  |  |  |  |  |  |
|   | Address (number and street)  | Submitted on:   |  |  |  |  |  |  |
|   | Fort Pierce, FL 34951  | 9/12/2016 18:44:47 (eastern)  |  |  |  |  |  |  |
|   | City, State, Zip Code  |   |  |  |  |  |  |  |
|   | Check here if address has changed  | (3) ID Number:  |  |  |  |  |  |  |
| (4)   | Check appropriate box(es):   |   |  |  |  |  |  |  |
|   | ☐ Candidate Office Sought: County Commis   | sioner, District 3  |  |  |  |  |  |  |
|   | Political Committee (PC)   |   |  |  |  |  |  |  |
|   | ☐ Electioneering Communications Org. (ECO)                                       | Check here if PC or ECO has disbanded   |  |  |  |  |  |  |
|   | ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an | <ul><li>☐ Check here if PTY has disbanded</li><li>☐ Check here if no other IE or EC reports will be filed</li></ul> |  |  |  |  |  |  |
|   | individual making electioneering communications)                                 | _ oncor here if no other in or no reports will be med   |  |  |  |  |  |  |
|   |  |   |  |  |  |  |  |  |
|   |  | dentifiers  |  |  |  |  |  |  |
| Cove  | er Period: From $\underline{5}$ / $\underline{1}$ / $\underline{2016}$ To        | 5 / 31 / 2016 Report Type: M5   |  |  |  |  |  |  |
| □ 0   | riginal Amendment Spo  | ecial Election Report   |  |  |  |  |  |  |
| (6)   | Contributions This Report  | (7) Expenditures This Report  |  |  |  |  |  |  |
|   |  | Monetary  |  |  |  |  |  |  |
| Cash  | n & Checks \$ , , 0 . 00   | Expenditures \$ , , 26 . 00   |  |  |  |  |  |  |
|   |  |   |  |  |  |  |  |  |
| Loar  | ns \$,, <u>0</u> . <u>00</u>   | Transfers to  |  |  |  |  |  |  |
|   | _  | Office Account \$ , , , 0 . 00  |  |  |  |  |  |  |
| Tota  | I Monetary \$ , , <u>0</u> . <u>00</u>   |   |  |  |  |  |  |  |
|   |  | Total Monetary \$ , , _26 . 00  |  |  |  |  |  |  |
| In-Ki   | nd \$,, <u>0</u> .00   |   |  |  |  |  |  |  |
|   |  | (8) Other Distributions   |  |  |  |  |  |  |
|   |  | \$ , , <u>0</u> . <u>00</u>   |  |  |  |  |  |  |
| (9)   | TOTAL Monetary Contributions To Date   | (10) TOTAL Monetary Expenditures To Date  |  |  |  |  |  |  |
| (-)   | \$, 10 , 823 . 39  | \$ ,10 , _65448   |  |  |  |  |  |  |
|   | , <u>100</u>   | , <u>10</u> , <u>331</u> : <u>10</u>  |  |  |  |  |  |  |
|   |  | tification  |  |  |  |  |  |  |
|   | It is a first degree misdemeanor for any pers                                    | on 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: |  |   |  |  |  |  |  |  |
| (T  | ype name)  | (Type name)   |  |  |  |  |  |  |
|   | Individual (only for IE  | ☐ Candidate ☐ Chairperson (only for PC and PTY)   |  |  |  |  |  |  |
| or  | electioneering comm.)  |   |  |  |  |  |  |  |
| Х   |  | ×   |  |  |  |  |  |  |
|   | gnature  | Signature   |  |  |  |  |  |  |

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

| (1) Name           | Patrick Campion               | (2) I.D. Number |                              |              |                  |           |        |  |  |
|--------------------|-------------------------------|-----------------|------------------------------|--------------|------------------|-----------|--------|--|--|
|                    | 5/1/2016                      |                 | 5                            | /31/2016     |                  |           |        |  |  |
| (3) Cover Perio    | od//                          | thro            | ough                         | 11           | (4) Pag          | e         | of     |  |  |
|                    |                               | T               |                              |              |                  |           |        |  |  |
| (5)                | (7)                           |                 | (8)                          | (9)          | (10)             | (11)      | (12)   |  |  |
| Date               | Full Name                     |                 |                              |              |                  |           |        |  |  |
| (6)                | (Last, Suffix, First, Middle) | _               | SECOND DESCRIPTION OF SECOND |              | Local Procession |           |        |  |  |
| Sequence<br>Number | Street Address &              |                 | ontributor                   | Contribution | In-kind          | Amendment | Amount |  |  |
| Number             | City, State, Zip Code         | Туре            | Occupation                   | Туре         | Description      | Amendment | Amount |  |  |
| .7 7               |                               |                 |                              |              |                  |           |        |  |  |
| 1 1                |                               |                 |                              |              |                  |           |        |  |  |
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| I = I              |                               |                 |                              |              |                  |           |        |  |  |
| VM 966             |                               |                 |                              |              |                  |           |        |  |  |
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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    | Patrick | Campi  | on |         |         |     | <br>(2) I.D. Nun | nber | 2  | 281 |  |
|-------------|---------|--------|----|---------|---------|-----|------------------|------|----|-----|--|
|             | 5       | /1/203 | 16 |         | 5/31/20 | 016 | ~ ~              |      |    |     |  |
| (3) Cover P | eriod   | I      | 1  | through | 1       | 1   | (4) Page         | 1    | of | 1   |  |

| (5)                      | (7)   | (8)   | (9)                 | (10)      | (11)    |
|--------------------------|---|---|---------------------|-----------|---------|
| Date (6) Sequence Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code   | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount  |
| 5/9/2016                 | Chamber of Commerce, St.<br>Lucie County<br>2937 W. Midway Road<br>Fort Pierce, FL 349.81 | event ticket  | МО                  | Add       | \$26.00 |
| //                       |   |   |                     |           |         |
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