

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Alexander Tommie  
 Name  
 (2) 3412 Sallie Chupco Tommie Way  
 Address (number and street)  
Fort Pierce, FL 34945  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1136695]

Submitted on:  
 11/28/2016 16:08:59 (eastern)

Check here if address has changed

(3) ID Number: 301

(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 6 / 1 / 2016 To 6 / 24 / 2016 Report Type: P1

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 . 72

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 72

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 8 , 484 . 40

### (10) TOTAL Monetary Expenditures To Date

\$        , 8 , 294 . 66

### (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 Alexander Tommie (2) I.D. Number 301

6/1/2016 through 6/24/2016

(3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (4) Page 1 of 0

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

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

(1) Name Alexander Tommie

(2) I.D. Number 301

(3) Cover Period 6/1/2016 through 6/24/2016

(4) Page 1 of 1

(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					
6/22/2016 //	Supervisor Of Elections , 4132 Okeechobee Rd Fort Pierce, Fl 34947	qualifying fee	MO	Add	\$0.72
1					
//					
//					
//					
//					
//					
//					
//					
//					