CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Democratic Club of St. Lucie County	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1143121]						
(2) <u>PO Box 9137</u> Address (number and street)	Submitted on:						
Address (number and street) Port St. Lucie, FL 34985	7/8/2017 19:39:56 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 8						
(4) Check appropriate box(es):							
Candidate Office Sought:							
☑ Political Committee (PC)							
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	<ul> <li>Check here if PC or ECO has disbanded</li> <li>Check here if PTY has disbanded</li> </ul>						
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							
Cover Period: From <u>6</u> / <u>1</u> / <u>201</u> 7 To	6/ 30/ 2017 Report Type:M6						
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$ , , , 0 . 00	Expenditures \$ , , , 00						
Loans \$,,0.00	Transfers to						
	Office Account \$ , , 0 · 00						
Total Monetary \$ , , 0.00							
	Total Monetary \$ , , 0 . 00						
In-Kind \$,,0 00							
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>81</u> , <u>152</u> . <u>68</u>	\$, 83, 506, 72						
(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) (Type name)							
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)						
or electioneering comm.)							
X	x						
Signature	Signature						

DS-DE 12 (Rev. 11/13)

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Democratic Club of	ic Club of St. Lucie County (2) I.D. Number 8					
	6/1/2017			/30/2017			
(3) Cover Pe	riod / /	thro			(4) Pag	e _1	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
6/29/2017 / /	Democratic Club of St Lucie Co, PO Box 9137			CA			\$0.0
1	Port St Lucie, FL 34985						
1 1							
1 1							
1 1						<u>,</u>	
/ /							
1 1							
/ 1							
1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name Democratic Club of St. Lucie County (2) I.D. Number 8						
(3) Cover Period	6/1/2017 I/through	6/30/2017 /(	4) Page <u>1</u>	of_	1	
(5) Date (6) Sequence Number	(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	
6/29/2017 1	Democratic Club of St Lucie Co, PO Box 9137 Port St Lucie, FL 34985	cash	MO		\$0.00	
_/ /						
_/ /						
_/ /						
_/ /						
_ / _						

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