

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jared Michael Greenberg
Name

(2) 702 SW Abode Avenue
Address (number and street)

Port St. Lucie, FL 34953
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1250983]

Submitted on:
11/3/2021 09:34:47 (eastern)

Check here if address has changed

(3) ID Number: 516

(4) Check appropriate box(es):

- Candidate Office Sought: City of Port St. Lucie, City Council District 3
- 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 10 / 1 / 2021 To 10 / 31 / 2021 Report Type: M10

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 137 . 05

Loans \$, , 0 . 00

Total Monetary \$, , 137 . 05

In-Kind \$, , 0 . 00

(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

\$, , 952 . 05

(10) TOTAL Monetary Expenditures To Date

\$, , 734 . 26

(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 Jared Michael Greenberg (2) I.D. Number 516

10/1/2021 through 10/31/2021

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (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
10/8/2021 / /	Greenberg, Jared M 702 SW Abode Ave Port Saint Lucie, FL 34953	O	specialcam	CH			\$137.05
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jared Michael Greenberg

(2) I.D. Number 516

(3) Cover Period 10/1/2021 through 10/31/2021

(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					
/ /					
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