CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) St. Johns County Democratic Executive							
Name	ONLINE SUBMISSION [1138456]						
(2) PO Box 4200 Address (number and street)	Submitted on:						
Address (number and street) St. Augustine, FL 32085	1/12/2017 09:20:39 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 698						
(4) Check appropriate box(es):							
Candidate Office Sought:							
Political Committee (PC)							
 Electioneering Communications Org. (ECO) Party Executive Committee (PTY) 	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
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>11</u> / <u>4</u> / <u>2016</u> To	12 / 31 / 2016 Report Type: <u>Q4</u>						
🗌 Original 🛛 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , 0 . 00	Monetary Expenditures \$, , 0.00						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Total Monetary \$, 0.00							
	Total Monetary \$						
In-Kind \$,,000							
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>70</u> , <u>361</u> . <u>55</u>	\$, <u>64</u> , <u>722</u> . <u>95</u>						
(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 or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
x	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name						.D. Number698		
	11/4/2016		12/31/2016					
(3) Cover Per	riod / /	thro	ough	<i>l</i> , <i>l</i>	(4) Pa	ge _1	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address &			Contribution	In-kind	Amendment	Amount	
11/4/2016 / /	City, State, Zip Code FULMER, 31 COQUINA AVE ST AUGUSTINE, FL 32080	Type I	Occupation	CA CA	Description	Delete	\$15.00	
11/4/2016 / / 2	FULMER, MATTHEW 31 COQUINA AVE ST AUGUSTINE, FL 32080	I		CA		Add	\$15.00	
1 1								
1 1								
1 1								
1 1								
1 1								
/ /								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name <u>St. Johns County Democratic Executive Committee</u> (2) I.D. Number <u>698</u>								
(3) Cover Period	11/4/2016 1 1 / / through	.2/31/2016	4) Page <u>1</u>	of_	0			
(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)			
(6) Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount			
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