

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Republican Party Executive Committee
 Name _____

 Address (number and street) _____

 City, State, Zip Code _____

OFFICE USE ONLY
ONLINE SUBMISSION
 [1145103]
 Submitted on:
 10/7/2017 13:59:07 (eastern)

Check here if address has changed

(3) ID Number: _____ 12

(4) Check appropriate box(es):

- Candidate Office Sought: _____
 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 7 / 1 / 2017 To 9 / 30 / 2017 Report Type: Q3

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 \$ _____ , 1 , 065 . 39
 Transfers to Office Account \$ _____ , _____ , 0 . 00
 Total Monetary \$ _____ , 1 , 065 . 39

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 51 , 881 . 11

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 46 , 522 . 11

(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 Republican Party Executive Committee (2) I.D. Number 12

7/1/2017 through 9/30/2017

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Republican Party Executive Committee

(2) I.D. Number 12

(3) Cover Period 7/1/2017 through 9/30/2017

(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
8/14/2017 //	Supervisor Elections, Wakulla County Crawfordville Hwy Crawfordville, Fl 32327	late file fee due to illness	MO		\$460.00
1					
8/14/2017 //	Allen, Robert 200 Bay Pine Dr Crawfordville, Fl 32327	reimburse treasurer for office supplies	MO		\$50.00
2					
8/14/2017 //	Wakulla County Women's , Republican Club Federated Wakulla County, Fl 32327	sponsor club with patron membership	MO		\$100.00
3					
8/14/2017 //	Russell, Chris 92 Pimilico Dr Crawfordville, Fl 32327	travel expenses rpof qtrly meeting	MO		\$243.13
4					
8/14/2017 //	Thomas, Ralph 637 Hunters Trace Crawfordville, Fl 32327	travel expenses rpof qtrly meeting	MO		\$212.26
5					
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