

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Democratic Executive Committee
 Name

 Address (number and street)

 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1089524]

Submitted on:
 10/13/2015 12:00:52 (eastern)

Check here if address has changed

(3) ID Number: 13

(4) Check appropriate box(es):

- | | |
|--|--|
| <input type="checkbox"/> Candidate Office Sought: _____ | <input type="checkbox"/> Check here if PC or ECO has disbanded |
| <input type="checkbox"/> Political Committee (PC) | <input type="checkbox"/> Check here if PTY has disbanded |
| <input type="checkbox"/> Electioneering Communications Org. (ECO) | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input checked="" type="checkbox"/> Party Executive Committee (PTY) | |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | |

(5) Report Identifiers

Cover Period: From 4 / 1 / 2015 To 6 / 30 / 2015 Report Type: Q2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$ _____ , _____ , <u>500</u> . <u>00</u>
Loans	\$ _____ , _____ , <u>0</u> . <u>00</u>
Total Monetary	\$ _____ , _____ , <u>500</u> . <u>00</u>
In-Kind	\$ _____ , _____ , <u>0</u> . <u>00</u>

(7) Expenditures This Report

Monetary Expenditures	\$ _____ , _____ , <u>0</u> . <u>00</u>
Transfers to Office Account	\$ _____ , _____ , <u>0</u> . <u>00</u>
Total Monetary	\$ _____ , _____ , <u>0</u> . <u>00</u>

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 9 , 530 . 82

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 8 , 282 . 06

(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 EXPENDITURES

(1) Name Democratic Executive Committee

(2) I.D. Number 13

(3) Cover Period 4/1/2015 through 6/30/2015

(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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