CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Republican Party Executive Committee

Name

(2) _____

Address (number and street)

,

City, State, Zip Code

☐ **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)

☒ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ **Check here if PC or ECO has disbanded**

☐ **Check here if PTY has disbanded**

☐ **Check here if no other IE or EC reports will be filed**

(5) Report Identifiers

Cover Period: From **4** / **1** / **2017**   To **6** / **30** / **2017**   Report Type: **Q2**

☐ 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	$ ___ , ___ , 0 . 00
Transfers to Office Account	$ ___ , ___ , 0 . 00
Total Monetary	$ ___ , ___ , 0 . 00

(8)   Other Distributions

$ ____ , ____ , 0 . 00

(9)   TOTAL Monetary Contributions To Date

$ ____ , 51 , 881 . 11

(10)   TOTAL Monetary Expenditures To Date

$ ____ , 45 , 456 . 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) _____

☐ 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_

(3) Cover Period _4/1/2017_ ___ / ___ / ___ through _6/30/2017_ ___ / ___ / ___ **(4) Page** _1_ of _0_

(5) Date / (6) Sequence Number	(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
___ / ___ / ___							
___ / ___ / ___							
___ / ___ / ___							
___ / ___ / ___							
___ / ___ / ___							
___ / ___ / ___							
___ / ___ / ___							
___ / ___ / ___							

DS-DE 13 (Rev. 11/13)   SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

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

(3) Cover Period 4/1/2017 / / through 6/30/2017 / /   **(4) Page** 1 of 0

(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
/ /					
/ /					
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/ /					
/ /					

DS-DE 14 (Rev. 11/13)   SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES