	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Ernest A. Armstrong	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	3637 Armstrong Mill Road	Submitted on:								
	Address (number and street)	2/10/2017 14:18:09 (eastern)								
	Vernon, FL 32462									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:29								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: County Commissioner District 3 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 									
	(5) Report	Identifiers								
Cov	er Period: From $\underline{6}$ / $\underline{1}$ / $\underline{2016}$ To	6 / 24 / 2016 Report Type: 2016P								
	riginal 🖾 Amendment 🗌 Spr	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , ,000	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, ,000	Total Monetary \$. 25 . 00								
In-Ki	sind \$,,,000	, , ,								
		(8) Other Distributions \$, , <u>0</u> 00_								
(9)	TOTAL Monetary Contributions To Date \$,,67300_	(10) TOTAL Monetary Expenditures To Date \$, ,63555								
_(T		rect, and complete: (Type name) Candidate Chairperson (only for PC and PTY)								
X		X Simples								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Ernest A. Armstron	g		(2) I.D. Number				
(3) Cover Peri	od////	thro	ough	/24/2016 //	(4) Pag	je <u>1</u>	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &		ontributor	Contribution	In-kind	Apparatores		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _E	Ernest	Α.	Arm	strong	ſ			 (2) I.D. Nur	nber		29	-
		6/1/	2016	6		6/24/	2016					
(3) Cover Po	eriod	1		1	through	1	1	(4) Page	1	of	1	

(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount	
6/6/2016	Waco , 4498 Hwy 79 Vernon , FL 32462	gas	МО	Add	\$25.00	
1	vernon , FB 32402					
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