

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Tom Stauffenberg

Name

(2) 2957 Higate Drive

Address (number and street)

Deltona, FL 32738

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

16-09-21 08:16 RCVD

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Deltona City Commission District 2
- 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 09 / 03 / 16 To 09 / 16 / 16 Report Type: G2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 17 . 00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 17 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 3543 . 99

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 2563 . 47

(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) Tom Stauffenberg

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
Signature

(Type name) Tom Stauffenberg

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Tom Stauffenberg

(2) I.D. Number _____

(3) Cover Period 09 / 03 / 16 through 09 / 16 / 16

(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
(6) Sequence Number					
09 / 03 / 16	Bank of America, P.O Box 25118, Tampa, FL 33622-5118	Monthly Service Charge			
1			CAN		17.00
/ /					
/ /					
/ /					
4					
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