

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Troy McDonald

Name

(2) 308 SW Dyer Drive

Address (number and street)

Stuart, FL 34994

City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Stuart City Commission Group 3

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 06 / 20 / 16 To 06 / 29 / 16 Report Type: Final

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , 141 . 28

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 141 . 28

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

Total Monetary \$ _____ , _____ , 141 . 28

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 141 . 28

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 141 . 28

(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) Troy McDonald

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

X _____
Signature

(Type name) Troy McDonald

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Troy McDonald (2) I.D. Number _____

(3) Cover Period 06 / 20 / 16 through 06 / 29 / 16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
06 / 20 / 16 1	Troy McDonald 308 SW Dyer Dr Stuart, FL 34994	S	Candidate	LOA			141.28
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Troy McDonald

(2) I.D. Number _____

(3) Cover Period 06 / 20 / 16 through 06 / 29 / 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					
06 / 20 / 16	City of Stuart 121 SW Flagler Ave Stuart, FL 34994	Filing Fee	CAN		141.28
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