

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JEFF KRAUSKOPF

Name

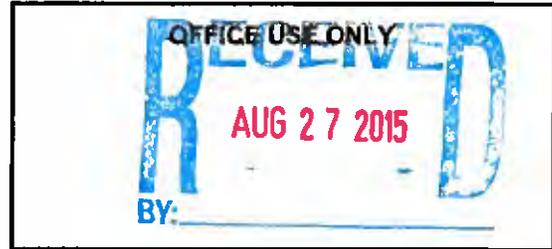
(2) PO Box 1225

Address (number and street)

Stuart FL 34995

City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(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 8 / 21 / 15 To 8 - 26 / 15 Report Type: FINAL

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . —

Loans \$, , 0 . —

Total Monetary \$, , 0 . —

In-Kind \$, , 0 . —

(7) Expenditures This Report

Monetary Expenditures \$, , 22 . 39

Transfers to Office Account \$, , 0 . —

Total Monetary \$, , 22 . 39

(8) Other Distributions

\$, , — . —

(9) TOTAL Monetary Contributions To Date

\$, 7,595 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 7,595 . 00

(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) JEFF KRAUSKOPF

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

(Type name) JEFF KRAUSKOPF

Candidate Chairperson (only for PC and PTY)

X
Signature

X
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEFF KREUSKOPF (2) I.D. Number FINAL

(3) Cover Period 8 / 21 / 15 through 8 / 26 / 15 (4) Page 1 of 1

| (5) Date | (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 |
|-------------|--|---|--|-----------------------------|--------------------------------|-------------------|----------------|
| 1 / 1 | None | | | | | | |
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JEFF KRAUSKOPF (2) I.D. Number Final
 (3) Cover Period 8/21/15 through 8/26/15 (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 |
|-------------|--|--|----------------------------|-------------------|----------------|
| 8/26/15 | JEFF KRAUSKOPF PO BOX 1225 STUART FL. 34995 | Loan Payer | CHE | - | 22.35 |
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