

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) KELLI GLASS LEIGHTON

Name

(2) P.O. BOX 1493

Address (number and street)

STUART, FLORIDA 34994

City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City Commission group IV

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 6 / 16 / 2015 To 7 / 8 / 15 Report Type: TR

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) KELLI GLASS LEIGHTON

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

X Kelli Glass Leighton
Signature

(Type name) KELLI GLASS LEIGHTON

Candidate Chairperson (only for PC and PTY)

X Kelli Glass Leighton
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name KELLI GLASS LEIGHTON (2) I.D. Number _____

(3) Cover Period 6 / 16 / 2015 through 7 / 8 / 15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
6 / 17 / 2015	Kelli Glass Leighton P.O. Box 1493 Stuart, Fl. 34994		SUPERVISOR	LOA			141.28
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