# Campaign Treasurer's Report Summary

**Name:** Tom Campenli for Stuart City Commission  
**Address:** 700 SW St. Lucie Cir  
**City, State, Zip Code:** Stuart FL 34994  
**ID Number:** 6-6  
**Date Received:** Aug 17 2016

**Check Box:** Check here if address has changed

**Box Check:**  
- Candidate  
- Office Sought: Stuart City Commission Group I
  - 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

## Report Identifiers

- **Cover Period:** From 08/13/16 to 08/14/16
- **Report Type:** C10
- **Original**  
- **Amendment**  
- **Special Election Report**

## Contributions This Report

<table>
<thead>
<tr>
<th>Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash &amp; Checks</td>
<td>$____, 00.00</td>
</tr>
<tr>
<td>Loans</td>
<td>$____, 00.00</td>
</tr>
<tr>
<td>Total Monetary</td>
<td>$____, 00.00</td>
</tr>
<tr>
<td>In-Kind</td>
<td>$____, 00.00</td>
</tr>
</tbody>
</table>

## Expenditures This Report

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Expenditures</td>
<td>$____, 00.00</td>
</tr>
<tr>
<td>Transfers to Office Account</td>
<td>$____, 00.00</td>
</tr>
<tr>
<td>Total Monetary</td>
<td>$____, 00.00</td>
</tr>
</tbody>
</table>

## Other Distributions

$____, ____

## Total Monetary Contributions To Date

$____, 20, 000.00

## Total Monetary Expenditures To Date

$____, 7, 000.00

## Certification

I certify that I have examined this report and it is true, correct, and complete:

**Type Name:**  
- Individual (only for IE)  
- Treasurer  
- Deputy Treasurer or electioneering comm.  
- Candidate

**Signature:**

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**Type Name:**  
- Candidate  
- Chairperson (only for PC and PTY)

**Signature:**

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**DS-DE 12 (Rev. 11/13)**

**SEE REVERSE FOR INSTRUCTIONS**