CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Becky Bruner
Name

(2) 625 Amanda Way
Address (number and street)
Stuart, FL 34996
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number:

(4) Check appropriate box(es):
☑ Candidate
☐ Office Sought:
City Commissioner Group 2
☐ 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 7/1/17 To 7/21/17 Report Type: G.3
☐ Original ☑ Amendment ☐ Special Election Report

(6) Contributions This Report
Cash & Checks $____, ____, 220.00
Loans $____, ____, ____, __
Total Monetary $____, ____, 220.00
In-Kind $____, ____, ____, __

(7) Expenditures This Report
Monetary Expenditures $____, ____, 8.49
Transfers to Office Account $____, ____, ____, __
Total Monetary $____, ____, 8.49

(8) Other Distributions
$____, ____, ____, __, __

(9) TOTAL Monetary Contributions To Date
$____, 12, 160.14

(10) TOTAL Monetary Expenditures To Date
$____, 4, 808.12

(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) Becky Bruner
(Treasurer) Becky Bruner
Signature

(Type name) Becky Bruner
(Candidate) Becky Bruner
Signature

SEE REVERSE FOR INSTRUCTIONS
<table>
<thead>
<tr>
<th>(5) Date</th>
<th>(6) Sequence Number</th>
<th>(7) Full Name (Last, Suffix, First, Middle) Street Address &amp; City, State, Zip Code</th>
<th>(8) Purpose (add office sought if contribution to a candidate)</th>
<th>(9) Expenditure Type</th>
<th>(10) Amendment</th>
<th>(11) Amount</th>
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<tbody>
<tr>
<td>7/18/17</td>
<td>F-1</td>
<td>PAYPAL P.O. Box 45950 Omaha, NE 68145</td>
<td>Sriv. Fees</td>
<td>CAN</td>
<td>ADD</td>
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<td>PAYPAL P.O. Box 45950 Omaha, NE 68145</td>
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<td>$1.03</td>
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<td>Sriv. Fees</td>
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DS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES
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<th>Occupation</th>
<th>Contribution Type</th>
<th>In-kind Description</th>
<th>Amendment</th>
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<td>A-1</td>
<td>Kaledominds Marketing</td>
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