

CAMPAIGN TREASURER'S REPORT SUMMARY



(1) MICHAEL MEIER
Name

(2) P.O. BOX 3112
Address (number and street)

STUART, FL 34995
City, State, Zip Code

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: STUART COMMISSIONER GROUP 1
- 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 / 23 / 18 To 7 / 6 / 18 Report Type: G2

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 1 , 028 . 94

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

Total Monetary \$ _____ , 1 , 028 . 94

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 6 , 275 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 2 , 452 . 89

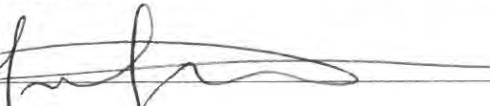
(11) Certification

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) MICHAEL MEIER

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

X 
Signature

(Type name) MICHAEL MEIER

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MICHAEL MEIER (2) I.D. Number _____

(3) Cover Period 6 / 23 / 18 through 7 / 6 / 18 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name MICHAEL MEIER

(2) I.D. Number _____

(3) Cover Period 6/23/18 through 7/6/18

(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					
6/29/18	PHOTOGRAPHICS 414 COLORADO AVE STUART, FL 34994	POSTERS	MON		\$ 424
1					
6/30/18	FACEBOOK INC 1601 WILLOW RD MENLO PARK, CA 94025	SOCIAL MEDIA PROMOTION	MON		\$ 5.88
2					
7/5/18	REPROGRAPHIC SOLUTIONS 234 SW P.S.L. BLVD PORT ST LUCIE, FL 34984	YARD SIGN DEPOSIT	MON		\$ 599.06
3					
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RECEIVED

JUL 13 2018