

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JAMES MURRAY
Name

(2) 1224 NORMANDY DR
Address (number and street)

MT DORA FLORIDA 32751
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: MOUNT DORA CITY COUNCIL AT LARGE

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 06 / 19 / 17 To 09 / 01 / 17 Report Type: 2017-G1

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 100.00

Loans \$ _____, _____, / /

Total Monetary \$ _____, _____, / /

In-Kind \$ _____, _____, 649.37

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, / /

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

Total Monetary \$ _____, _____, / /

(8) Other Distributions

\$ _____, _____, / /

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 749.37

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 00.00

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

(Type name) JAMES MURRAY
 Candidate Chairperson (only for PC and PTY)

X _____
Signature

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JAMES MURRAY (2) I.D. Number _____

(3) Cover Period 06 / 19 / 17 through 09 / 01 / 17 (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
(6) Sequence Number		Type	Occupation	Type	Description		
08 / 07 / 17 1	JAMES MURRAY 1224 NORMANDY DRNE MOUNT DORA, FL	I	RETIRED	CASH	OPEN ACCOUNT		\$100 -
08 / 28 / 17 2	JAMES MURRAY 1224 NORMANDY DR MOUNT DORA FL 32757	I	RETIRED	INK	CAMPAIGN LETTERS		\$159 43
08 / 30 / 17 3	JAMES MURRAY 1224 NORMANDY DR MOUNT DORA FL 32757	I	RETIRED	INK	CAMPAIGN SIGNS		\$489 .94
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JAMES MURRAY

(2) I.D. Number _____

(3) Cover Period 06 / 19 / 17 through 09 / 01 / 17

(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					
/ /	NONE	/	/	/	/
/ /					
/ /					
/ /					
/ /					
/ /					