

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Donna Guthrie
 Name
 (2) 401 SW 31 Ave
 Address (number and street)
Fort Lauderdale FL 33312
 City, State, Zip Code

OFFICE USE ONLY	
2014 AUG 11 PM 3:31	CITY CLERK

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: City of Fort Lauderdale Commission District 3
- 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 / 2014 To 7 / 31 / 2014 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 745.00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 745.00

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , _____

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 5 , 124 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 973 . 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) LEON BUNTING

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

Leon C Bunting
 Signature

(Type name) Donna Guthrie

Candidate Chairperson (only for PC and PTY)

Donna Guthrie
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Donna Guthrie (2) I.D. Number _____

(3) Cover Period 07 / 01 / 2014 through 07 / 31 / 2014 (4) Page 1 of 2

(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		Amount
7 / 12 / 2014	Walters Seymour 3221 Glendale Blvd 33312		Retired	check			\$250.00
7 / 12 / 2014	Broomfield Evelyn 651 Pennsylvania Ave 33312		Retired	check			\$25.00
7 / 15 / 2014	Brown Colette 7650 NW 61 Terrace 33087		Manager	check			\$25.00
7 / 15 / 2014	Dulcie Young-McLennon 8021 NW 54 St 33351		Manager	check			\$25.00
7 / 15 / 2014	Dacosta, Gaston P.O. Box 521 Carthage N.Y 13619		Doctor	check			\$25.00
7 / 06 / 2014	Smith, Audrey 6694 Old Farm Trail Boynton Beach 33437		nurse	check			\$75.00
7 / 9 / 2014	Mohan, Ingrid 1862 NW 97th Ave Coral Springs 33071		Realtor	check			\$50.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Donna Guthrie (2) I.D. Number _____

(3) Cover Period 7 / 1 / 2014 through 7 / 31 / 2014 (4) Page 2 of 2

(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	Amendment	Amount
7 / 9 / 2014	Overton, Marcia 16233 SW 16th Street Miramar Fl 33027		Realtor	Check			10.00
7 / 9 / 2014	Scott, Trevor 12178 NW 49th Street Coral Springs Fl 33076		Realtor	Check			25.00
7 / 9 / 2014	Diane Kessel 4020 NW 20 St Lauderdale lakes 33313		Realtor	Check			10.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Donna Guthrie

(2) I.D. Number _____

(3) Cover Period 7 / 2014 through 7 / 31 / 2114

(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					
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