CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Gary L. Antieau
Name

(2) 809 N Lakeside Dr
Address (number and street)
Lake Worth, FL 33460
City, State, Zip Code

OFFICE USE ONLY
RECEIVED
FEB 17 2016
BY:

☐ **Check here if address has changed**

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Mayor of Lake Worth
☐ 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 1 / 1 / 16 To 1 / 31 / 16 Report Type: M1

☐ Original ☒ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks	$, , 100.
Loans	$, , .
Total Monetary	$, , 100.
In-Kind	$, , .

(7) Expenditures This Report

Monetary Expenditures	$, , 510. 79
Transfers to Office Account	$, , .
Total Monetary	$, , 510. 79

(8) Other Distributions

$, , .

(9) TOTAL Monetary Contributions To Date

$, 1 , 050. —

(10) TOTAL Monetary Expenditures To Date

$, , 749. 79

(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) Gary L. Antieau
☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer
X _____
Signature

(Type name) Gary L Antieau
☒ Candidate ☐ Chairperson (only for PC and PTY)
X _____
Signature

SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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(1) Name Gary L. Antiera **(2) I.D. Number** _____

(3) Cover Period 1 / 1 / 16 through 1 / 31 / 16 **(4) Page** _____ of _____

(5) Date / (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Contributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
1 / 1 / 16 1	John Jordan 1500 Lucerne #1109 Lake Worth, FL 33460	I	Retired	CAS		DEL	$ 100 -
/ / 							
1 / 1 / 16 2	John Jordan 1500 Lucerne #1109 Lake Worth FL 33460	I	Retired	CHE		ADD	$ 100 -
/ / 							
/ / 							
/ / 							
/ / 							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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BY:

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Gary L. Antieau (2) I.D. Number _____

(3) Cover Period 1/1/16 through 1/31/16 (4) Page _____ of _____

(5) Date / (6) Sequence Number	(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
1/18/16 / 1	ASAP GRAPHICS 802 Statesville suite F Charlotte, NC 28269	YARD SIGNS	CAN	DEL	405.23
1/1/16 / 2	OFFICE DEPOT 4558 Lakewood Rd Lake Wood, 71 33462	Flyers & Cards	CAN	DEL	107.06
1/3/16 / 3	OFFICE DEPOT 4558 Lakewood Rd Lake Wood, 71 33462	Labels	CAN	DEL	10.50
/ / /					
1/18/16 / 4	ASAP GRAPHICS 802 Statesville Charlotte, NC 28269	YARD SIGNS	MON	ADD	405.23
1/1/16 / 5	OFFICE DEPOT 4558 Lakewood Rd Lake Wood, 71 33462	Flyers & Cards	MON	ADD	107.06
1/3/16 / 6	OFFICE DEPOT 4558 Lakewood Rd Lake Wood, 71 33462	Labels	MON	ADD	10.50
1/14/16 / 7	Bank of America 14 N Fed Hwy Lake Wood, 71 33460	Bank FEES Checks	MON	ADD	48.00