

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Pamela Triolo Clabane  
Name

(2) 2417 N. Federal Hwy  
Address (number and street)  
Lakewood, FL 33460  
City, State, Zip Code



Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: Mayor
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 9/1/15 To 9/30/15 Report Type: M9

- Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ 0, 0, 0 . 0

Loans \$ 0, 0, 0 . 0

Total Monetary \$ 0, 0, 0 . 0

In-Kind \$ 0, 0, 0 . 0

### (7) Expenditures This Report

Monetary Expenditures \$ 0, 0, 0 . 0

Transfers to Office Account \$ 0, 0, 0 . 0

Total Monetary \$ 0, 0, 0 . 0

### (8) Other Distributions

\$ 0, 0, 0 . 0

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, \_\_\_\_\_, 0 . 0

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, \_\_\_\_\_, 0 . 0

### (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) Pamela Triolo Clabane (Type name) Pamela Triolo Clabane

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

Candidate  Chairperson (only for PC and PTY)

Pamela Clabane  
Signature

Pamela Clabane  
Signature