

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lake Worth Yes!

Name

(2) 114 Ocean Breeze

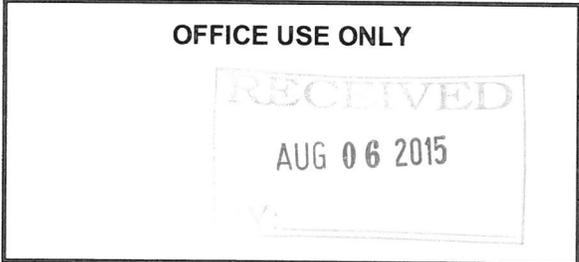
Address (number and street)

Lake Worth, Florida 33460

City, State, Zip Code

Check here if address has changed

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



(4) Check appropriate box(es):

Candidate Office Sought: \_\_\_\_\_

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 07 / 01 / 15 To 07 / 31 / 15 Report Type: M7

Original       Amendment       Special Election Report

### (6) Contributions This Report

Cash & Checks      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

Loans      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

In-Kind      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures      \$ \_\_\_\_\_ , \_\_\_\_\_ , 1 . 50

Transfers to Office Account      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , 1 . 50

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 19 , 950 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , 15 , 768 . 85

### (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) Margaret L. Fisher

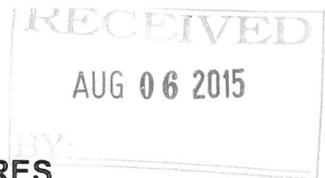
Individual (only for IE)     Treasurer     Deputy Treasurer or electioneering comm.)

**X** Margaret L. Fisher  
Signature

(Type name) Herman C. Robinson

Candidate       Chairperson (only for PC and PTY)

**X** Herman C. Robinson  
Signature



**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Lake Worth Yes!

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 01 / 15 through 07 / 31 / 15

(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					
07 / 31 / 15  1	Palm Beach County Credit Union 3469 Summit Boulevard West Palm Beach, Florida 33406	Bank Fee	Mon		1.50
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