**CAMPAIGN TREASURER’S REPORT SUMMARY**

1. **Vote Yes For Winter Park Library**
   - Name: [Name]
   - Address (number and street): [Address]
   - City, State, Zip Code: [Winter Park, FL 32790]

2. Check here if address has changed [ ]

3. **ID Number:** [________] (Office Use Only)

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) [ ]

5. **Report Identifiers**
   - Cover Period: From [12/05/15] to [12/18/15]
   - Report Type: [P2]
   - Original [X] Amendment [ ] Special Election Report [ ]

6. **Contributions This Report**
   - Cash & Checks: [_____ , _____, 100.00]
   - Loans: [_____ , _____, _____]
   - Total Monetary: [_____ , _____, _____]
   - In-Kind: [_____ , _____, _____]

7. **Expenditures This Report**
   - Monetary Expenditures: [_____ , _____, _____, 0]
   - Transfers to Office Account: [_____ , _____, _____]
   - Total Monetary: [_____ , _____, _____]

8. **Other Distributions**
   - [_____ , _____, _____]

9. **TOTAL Monetary Contributions To Date**
   - [_____ , _____, 325, 00]

10. **TOTAL Monetary Expenditures To Date**
    - [_____ , _____, _____, 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)** [Martin M. Prague]
   - **(Type name)** [Jeffery T. Jontz]
   - **Signature** [Signature]

---

DS-DE 12 (Rev. 11/13)
**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

1. **Name**: Vote Yes For Winter Park Library
2. **I.D. Number**: 
3. **Cover Period**: 12/10/15 through 12/18/15
4. **Page**: 1 of 1

<table>
<thead>
<tr>
<th>Date</th>
<th>Sequence Number</th>
<th>Full Name</th>
<th>Contributor Type</th>
<th>Occupation Type</th>
<th>In-kind Description</th>
<th>Amendment</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/16/15</td>
<td>001</td>
<td>Neda Khosrovani</td>
<td>I</td>
<td>LTE</td>
<td>32759</td>
<td>50.00</td>
<td></td>
</tr>
<tr>
<td>12/18/15</td>
<td>002</td>
<td>Phyllis Corkum</td>
<td>I</td>
<td>RCT</td>
<td>32752</td>
<td>25.00</td>
<td></td>
</tr>
<tr>
<td>12/18/15</td>
<td>003</td>
<td>Smith, Sabrina</td>
<td>I</td>
<td>RCT</td>
<td></td>
<td>25.00</td>
<td></td>
</tr>
</tbody>
</table>

DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES
<table>
<thead>
<tr>
<th>(5) Date</th>
<th>(6) Sequence Number</th>
<th>(7) Full Name (Last, Suffix, First, Middle) Street Address &amp; City, State, Zip Code</th>
<th>(8) Purpose (add office sought if contribution to a candidate)</th>
<th>(9) Expenditure Type</th>
<th>(10) Amendment</th>
<th>(11) Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/18/15</td>
<td>001</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DS-DE 14 (Rev. 11/13)  SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES