

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Saving Our Library WP

Name _____

(2) Post Office Box 1376

Address (number and street) _____

Winter Park, Florida 32790-1376

City, State, Zip Code _____

Check here if address has changed

OFFICE USE ONLY

04-11-16P03:49 RCVD

(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 03 / 12 / 16 To 03 / 31 / 16 Report Type: M3

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 234 . 45

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 4 , 350 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 2 , 503 . 97

(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) Michael Poole

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

X

Signature

(Type name) Michael Poole

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Saving Our Library WP (2) I.D. Number _____

(3) Cover Period 03 / 12 / 16 through 03 / 31 / 16 (4) Page 1 of 1

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor | | (9) Contribution | (10) In-kind | (11) Amendment | (12) Amount |
|---------------------------|--|--------------------|------------|---------------------|-----------------|-------------------|----------------|
| (6) Sequence Number | | Type | Occupation | Type | Description | | |
| / / | Nothing to report on this page. | | | | | | |
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CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Saving Our Library WP (2) I.D. Number _____

(3) Cover Period 03 / 12 / 16 through 03 / 31 / 16 (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) Related Expenditures | (10) Amendment | (11) Amount | (12) Distribution Type |
|---------------------------|--|--|--------------------------------|-------------------|----------------|------------------------------|
| (6) Sequence Number | | | | | | |
| / / | Nothing to report on this form | | | | | |
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CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name Saving Our Library WP

(2) I.D. Number _____

(3) Cover Period 03 / 12 / 16 through 03 / 31 / 16

(4) Page 1 of 1

| (5) Date | (7) Name of Financial Institution Street Address & City, State, Zip Code | (8) Transfer Type | (9) Nature of Account | (10) Amendment | (11) Amount |
|------------------------|---|----------------------|--------------------------|-------------------|----------------|
| (6) Sequence Number | | | | | |
| / / | Nothing to report on this form. | | | | |
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