

AMENDS M5 REPORT  
From 6-13-16

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) VOTE YES FOR WINTER PARK LIBRARY

Name PARKING - EVENTS CENTER

(2) P.O. BOX 638

Address (number and street)

WINTER PARK, FL 32790

City, State, Zip Code

OFFICE USE ONLY

08-16-16P01:47 RCVD

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 5 / 1 / 16 To 5 / 31 / 16 Report Type: M5

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ 0, \_\_\_\_, \_\_\_\_, \_\_\_\_

Total Monetary \$ 0, \_\_\_\_, \_\_\_\_, \_\_\_\_

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

(7) Expenditures This Report

Monetary Expenditures \$ 0, \_\_\_\_, \_\_\_\_, \_\_\_\_

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

Total Monetary \$ 0, \_\_\_\_, \_\_\_\_, \_\_\_\_

(8) Other Distributions

\$ \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date

\$ 24195.00

(10) TOTAL Monetary Expenditures To Date

\$ 22835.28

(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

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

X by Martin M. Prague  
Signature

(Type name) JEFFRY R. JONTZ

Candidate  Chairperson (only for PC and PTY)

X [Signature]  
Signature

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

(1) Name YES FOR WINTER PAPER LIBRARY, ETAL (2) I.D. Number \_\_\_\_\_

(3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (4) Page \_\_\_\_ of \_\_\_\_

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /							
			0				
/ /							
/ /							
/ /							
/ /							
/ /							

