

CAMPAIGN TREASURER'S REPORT SUMMARY

RECEIVED

(1) Steven S. Wells Sr
 Name
 (2) 3734 Pauls Ave
 Address (number and street)
K.W. Fla 33040
 City, State, Zip Code

2015 SEP 25 AM 10:10
 OFFICE USE ONLY
 CITY OF KEY WEST
 KEY WEST, FLORIDA

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: Utility Bd Grp 1
 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 8/01/15 To 8/31/15 Report Type: m8
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____
 Loans \$ _____
 Total Monetary \$ _____
 In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 15.10
 Transfers to Office Account \$ _____, _____, 0.00
 Total Monetary \$ _____, _____, 15.10

(8) Other Distributions
 \$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date
 \$ _____, _____, _____

(10) TOTAL Monetary Expenditures To Date
 \$ _____, _____, 16.10

(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) Steven S. Wells Sr
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
 Steven S Wells Sr
 Signature

(Type name) Steven S. Wells
 Candidate Chairperson (only for PC and PTY)
 Steven S Wells
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Steven S Wells Sr (2) I.D. Number _____
 (3) Cover Period 8/01/15 through 8/31/15 (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
8/4/15 1	Supervisor of Elec 530 Whitehead St K.W. Fla 33040	Qualify certificates	DPV		15.10
8/31/15 2	City of K.W. P.O. Box 1409 K.W. Fla 33040	Qualifying	CAN		1.00
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