

## CAMPAIGN TREASURER'S REPORT SUMMARY

16 OCT 14 PM 4:33

(1) Alexander Lewy  
Name

(2) P.O. Box 4444  
Address (number and street)  
Hallandale Beach, FL 33008  
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

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

(4) Check appropriate box(es):

- Candidate Office Sought: Hallandale Beach City Commission Seat 4
- 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 10 / 01 / 16 To 10 / 07 / 16 Report Type: 2016 G4

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 \$ \_\_\_\_\_, 3,791.50

Transfers to Office Account \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

Total Monetary \$ \_\_\_\_\_, 3,791.50

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, 0.00

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 39,156.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 7,564.97

### (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) Alex Lewy

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

(Type name) Alex Lewy

Candidate  Chairperson (only for PC and PTY)

X   
Signature

X   
Signature

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

(1) Name Alex Lewy (2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 1 / 16 through 10 / 7 / 16 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								

16 OCT 14 PM 4:33  
CLERK

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

(1) Name Alex Lewy

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

(3) Cover Period 10 / 1 / 16 through 10 / 7 / 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) Expenditure Type	(10) Amendment	(11) Amount
10/3/16	Ocean Printers 2413 Stirling Rd. Ft. Laud., FL 33312	Printing	MON		291. <sup>50</sup>
1					
10/3/16	Thomas Fred 16385 NW 12 <sup>th</sup> St. Pembroke Pines FL 33028	Mailing	MON		3500. <sup>00</sup>
2					
///					
///					
///					
///					
///					
///					
///					

OCT 14 PM 4:33  
 CITY CLERK  
 OFFICE OF THE CLERK