

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Dan Booker

Name

(2) 1617 East River Drive

Address (number and street)

Margate, FL 33063

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Margate City Commission Seat #2

☐ 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 05 / 01 / 2020 To 05 / 31 / 2020 Report Type: 2020M5

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 1, 020 . 00

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

Total Monetary \$ _____ , _____ , 1, 020 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 3 , 100 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 2 , 429 . 00

(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) Dan Booker

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

X

Signature

(Type name) Dan Booker

☒ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

MARGATE

(1) Name Dan Booker

(2) I.D. Number JUN 10 2020

(3) Cover Period 05 / 01 / 2020 through 05 / 31 / 2020

(4) Page 1 of 1

QUALIFYING OFFICES

(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
/ /	N/A						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

URES JUN 10 2020

_____ of _____ 1
(10) (11)

(2) I.D. Number

(4) Page 1 of 1

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES