

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Margolis
Name

(2) 657 Juniper Pl
Address (number and street)
Wellington, FL 33414
City, State, Zip Code

OFFICE USE ONLY	
06-08-15	P09:39 IN

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Mayor

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 / 15 To 05 / 31 / 15 Report Type: 2015 M5

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , 100 . 00

Total Monetary \$ _____ , _____ , 100 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 31 . 12

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

Total Monetary \$ _____ , _____ , 31 . 12

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 100 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 31 . 12

(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) Linda Margolis

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

x Linda Margolis
Signature

(Type name) Robert Margolis

Candidate Chairperson (only for PC and PTY)

x Robert Margolis
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robert Margolis (2) I.D. Number _____

(3) Cover Period 05 / 01 / 15 through 05 / 31 / 15 (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		
05/18/15 / /	Robert Margolis 657 Juniper Pl Wellington, Fl 33414	I	Mayor	Loan			100.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert Margolis (2) I.D. Number _____

(3) Cover Period 05 / 01 / 15 through 05 / 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
05/26/15	Wells Fargo 2205 St Rd 7 Wellington, FL 33414	Bank Charge	Mon		31.12
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