

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Leo Grachow
Name

(2) 200 Leslie Dr. Apt. 818
Address (number and street)

Hallandale Beach, FL 33009
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

14 JUL -7 PM 4:41

CITY OF HALLANDALE
CITY CLERK

(4) Check appropriate box(es):

Candidate Office Sought: City Commissioner

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 6/1/14 To 6/30/14 Report Type: 2014M6

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0.00, _____

Loans \$ 1000.⁰⁰/_{XX}, _____

Total Monetary \$ 1000.⁰⁰/_{XX}, _____

In-Kind \$ 0.00, _____

(7) Expenditures This Report

Monetary Expenditures \$ 273.79, _____

Transfers to Office Account \$ 0.⁰⁰/_{XX}, _____

Total Monetary \$ 273.⁷⁹/_{XX}, _____

(8) Other Distributions

\$ 0.⁰⁰/_{XX}, _____

(9) TOTAL Monetary Contributions To Date

\$ 1000.⁰⁰/_{XX}, _____

(10) TOTAL Monetary Expenditures To Date

\$ 273.⁷⁹/_{XX}, _____

(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) Amy Grachow

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

X Amy Grachow
Signature

(Type name) Leo Grachow

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Leo Grachow (2) I.D. Number _____

(3) Cover Period 6/1/14 through 6/30/14 (4) Page 2 of 3

(5) Date	(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
(6) Sequence Number		Type	Occupation				
6/11/14	Leo Grachow 200 Leslie Dr. Apt. 818 Hallandale Beach FL, 33009	I	retired/ commiss- ioner	LOA			\$1000-
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 CITY CLERK

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Leo Grachow

(2) I.D. Number _____

(3) Cover Period 6/1/14 through 6/30/14

(4) Page 3 of 3

(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
6/18/14	City of Hallandale Beach 400 S. Federal Hwy Hallandale Beach, FL 33009	city filing fee	MON		\$ 50 -
6/18/14	City of Hallandale Beach 400 S. Federal Hwy Hallandale Beach, FL 33009	State filing fee	MON		223.79
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