

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ITZHACK FELDMAN  
Name

(2) 325 516 AV  
Address (number and street)

LWD FC 33020  
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

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

(4) Check appropriate box(es):

- Candidate Office Sought: Commission Dist 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 11 / 04 / 10 To 1 / 11 / 17 Report Type: TR

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_, \_\_\_\_\_, 0 . 00

Loans \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 0 . 00

In-Kind \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, 78 . 00

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

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 78 . 00

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 1 , 350 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 1 , 272 . 00 IF

1 , 350 . 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) ITZHACK FELDMAN

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

(Type name) ITZHACK FELDMAN

Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
Signature

X \_\_\_\_\_  
Signature

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

(1) Name STZHACK FELDMAN (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 01 / 16 through 1 / 11 / 17 (4) Page 1 of 1

(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				
/ /							
							None
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name J THAC FELDMAN (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 11, 04, 16 through 1, 11, 17 (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
(6) Sequence Number					
11/29/16	PNC Bank	fees	MON		\$71.50
1	1837 Tyler St. Hard				406p IF
11/07/16	Gino Deli	food	CAN		\$6.50
2	2600 Hwy 100 Blvd. City Hall	<del>CAN</del> IF			
1/1					
1/1					
1/1					
1/1					
1/1					