

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) LINDA SHERWOOD

Name

(2) 5300 WASHINGTON ST. D-104

Address (number and street)

HOLLYWOOD, FL 33021

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: HOLLYWOOD CITY COMMISSION DISTRICT 6

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 NOV 1 2015 To NOV 30 2015 Report Type: 2015 M11

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0, ____, ____. ____

Loans \$ 0, ____, ____. ____

Total Monetary \$ 0, ____, ____. ____

In-Kind \$ 0, ____, ____. ____

(7) Expenditures This Report

Monetary Expenditures \$ 0, ____, ____. ____

Transfers to Office Account \$ 0, ____, ____. ____

Total Monetary \$ 0, ____, ____. ____

(8) Other Distributions

\$ 0, ____, ____. ____

(9) TOTAL Monetary Contributions To Date

\$ ____, 1,500.00

(10) TOTAL Monetary Expenditures To Date

\$ ____, 34.00

(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) WILLIAM SHERWOOD

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

[Signature]
Signature

(Type name) LINDA SHERWOOD

Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name LINDA SHERWOOD (2) I.D. Number _____
 (3) Cover Period NOV 1 2013 through NOV 30 2013 (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					
<u>11</u>	<u>[Signature]</u>				
<u>11</u>	<u>[Signature]</u>				
<u>11</u>	<u>[Signature]</u>				
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<u>11</u>	<u>[Signature]</u>				

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name LINDA SHERWOOD (2) I.D. Number _____

(3) Cover Period NOV 1 2015 through NOV 30 2015 (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		
/ /	_____						
/ /	_____						
/ /	_____						
/ /	_____						
/ /	_____						
/ /	_____						