CAMPAIGN TREASURER'S REPORT SUMMARY			
(1) Some  (2) Some Some Some Some Some Some Some Some			
(5) Report	^		
Cover Period: From US /U1 / 2018 To	11 / 08 / 2018 Report Type: TR		
Original Amendment Spe	cial Election Report		
(6) Contributions This Report	(7) Expenditures This Report		
Cash & Checks \$,,	Monetary Expenditures \$,,		
Loans \$,,	Transfers to Office Account \$ , ,		
Total Monetary \$ , ,	Total Monetary \$ , , .		
In-Kind \$ , ,			
	(8) Other Distributions \$ , ,		
(9) TOTAL Monetary Contributions To Date \$ , ,	(10) TOTAL Monetary Expenditures To Date		
(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) Truck Compared Co	(Type name) Svivu C. ErvAu d  ☐ Candidate ☐ Chairperson (only for PC and PTY)		
Signature 2	X Jun G. Suma 2 Signature		

## 

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
ପ /ଧ /1୫	Bruu G. Pervaud	Repairment of	٥		439.18
//					
/ /					
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/ /					
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/ /				,	7-1 p x -

## **WAIVER OF REPORT**

(Section 106.07(7), F.S.)

(PLEASE TYPE)

RECEIVED

AUG 1 0 2018

TY CLERK'S OFFICE

OFFICE USE ONLY

Bruce G. Perraud		Commission	Seat	t 5
Name			Sought	
6221 Almon JIEC)		Plantation	PI	33317
Addre	ess	City	State	Zip Code
Candidate	Political Committee	Party Executive	e Committee	
NOTE: This form does not apply to an electioneering communications organization (ECO). An ECO must file a report (not a waiver) that no reportable contributions or expenditures were made during the reporting period (s. 106.0703(6), F.S.).				
Check here if address has c	shanged since last report.	Check here if PC has DISBA reports.	NDED and will no	longer file
TYPE OF REPORT	(Check Appropriate Box	and Complete Applicable	Line beneath	Box)
MONTHLY REPORT	PRIMARY ELECTION	GENERAL ELECTION	☐ OTHER REI	PORT TYPE
Indicate report #	Indicate report #	Indicate report #	Indicate report	type and #
M72018	P	G	as applicable:	
TERMINATION REPORT   SPECIAL ELECTION				
NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF				
711118	) THRO	DUGH 7/3/1/8	<u> </u>	
John G. K.	Emar d	08109	7/18	
Signature Date				
Jun G.	reum 2	00/0	9/18	
s	ignature		Date	,
Candidates: Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)  Political Committees: Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)  Party Executive Committees: Treasurer and Chairman (s. 106.29(2), F.S.)				
Except as noted above for an ECO, in any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.				

	CAMPAIGN TREASURE	R'S REPORT SUMMARY			
(1)	Bruco C	OFFICEUSEONLY			
	Name 6221 Almond Terrace Plantation, FL 33317	4 5 2049			
(2)	Address (number and street)	JUL 1 6 2018			
	Address (number and street)	CITY CLERK'S OFFICE			
	City, State, Zip Code				
	☐ Check here if address has changed	(3) ID Number:			
(4)	Check appropriate box(es):				
	Candidate Office Sought:	5			
	☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐	☐ Check here if PC or ECO has disbanded			
	☐ Party Executive Committee (PTY)	Check here if PTY has disbanded			
	Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed			
	(5) Report				
Cove	er Period: From $O(6 / OI / 20)$ 8 To	<u>66   30   20/8</u> Report Type: 20/8 M 6			
RO	riginal Amendment Spe	cial Election Report			
(6)	Contributions This Report	(7) Expenditures This Report			
Casl	n & Checks \$,,,	Monetary Expenditures \$ , , <u>SUD</u> . <u>BB</u>			
Loar	s,,,	Transfers to Office Account \$ ,			
Tota	I Monetary \$ , ,				
	•	Total Monetary \$, 560, & 2			
In-K	ind \$,,				
		(8) Other Distributions \$ , ,			
(9)	<b>TOTAL Monetary Contributions To Date</b>	(10) TOTAL Monetary Expenditures To Date			
	\$, <u>\</u> , <u>OUP</u> . <u>UU</u>	\$,, 501.02			
(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) TVU ( C ( C ) 1  Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) Chairperson (only for PC and PTY)			
X	B446P2	xx in Con L			
5	<del>ig</del> nature	Signature			

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

(1) Name DIVE G Crrawa			(2) I.D. Number				
(3) Cover Period 01/12018 through 02/14/2018 (4) Page 1 of 1							
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
04/22/18	Bruce G. Perraud 6221 Almond Terrace Plantation, FL 33317	cnx	L1a	-		, 3	1,000.00
J J							
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1 1	1						
1 1							
I I							
1 1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (2) I.D. Number \_ (3) Cover Period ((1) 1 1 20) (1) through (6 130 1 20 1 6 (4) Page of (7) (8) (9) (10) (11) (5) **Date Full Name Purpose** (Last, Suffix, First, Middle) (add office sought if (6) **Expenditure** Street Address & contribution to a Sequence Type City, State, Zip Code candidate) **Amount** Amendment Number

## CANDIDATE OATH – NONPARTISAN OFFICE

(Do not use this form if a Judicial or School Board Candidate)

Check box **only** if you are seeking to qualify as a write-in candidate:

RECEIVED

JUN 22 2018

CITY CLERK'S OFFICE

☐ Write-in candidate				
	OFFICE USE ONLY			
Candidate Oath  (Section 99.021(1)(a), Florida Statutes)  (Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)				
am a candidate for the nonpartisan office of Plantation  (Circuit #)  (Group or Seat #)				
I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.				
Candidate's Florida Voter Registration Number (located on your voter information card): 101496196				
Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]				
Signature of Candidate  Telephone Number  Total Control  Address  City  STATE OF FLORIDA	State Slavery Public  Signature of Notary Public			
COUNTY OF Broward	Print, Type, or Stamp Commissioned Name of Notary Public below:			
Sworn to (or affirmed) and subscribed before me this 22 day of June , 20 18.  Personally Known: or Produced Identification:  Type of Identification Produced: FL	Notary Public State of Florida Susan K Slattery My Commission FF 910310 Expires 09/27/2019			