

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) EDWARD B. GALANTE

Name

(2) 800 NW Fork Rd. 5-P

Address (number and street)

STUART, FL 34994

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____



(4) Check appropriate box(es):

Candidate Office Sought: STUART City Commission Group #3

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 / 27 / 20 To 7 / 10 / 20 Report Type: P-3

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 3,300.00

Loans \$ 1,666.00

Total Monetary \$ 4,966.00

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 5,666.00

Transfers to Office Account \$ _____

Total Monetary \$ 5,666.00

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 10,266.00

(10) TOTAL Monetary Expenditures To Date

\$ 7,918.88

(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) EDWARD B. GALANTE

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

X
Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Edward B. Gavarte (2) I.D. Number _____

(3) Cover Period 6 / 27 / 20 through 7 / 10 / 20 (4) Page 7 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
6 / 30 / 20	John + Linn Peterson	I	Retail Sales	CHE			\$ 250.00
1	4 OAKWOOD DR STUART, FL 34994						
7 / 1 / 20	Mike Brand	I	Business man	CHE			\$ 500.00
2	45 SW Seminole ST. STUART, FL. 34994						
7 / 1 / 20	CHRIS + Amy Bredon	I	Business man	CHE			\$ 500.00
3	544 SW ST ST. LUCIE CROSSCUT STUART, FL 34994						
7 / 8 / 20	Palm Beach Police Benefit.	B	Corp.	CHE			\$ 1000.00
4	2100 NO. Hango Rd. West. Palm, Beach FL 33409						
7 / 10 / 20	Tony Barletta	I	Business man	CHE			\$ 200.00
5	1568 SW SEED Holly WAY Palm City, FL. 34950						
7 / 10 / 20	EADL + Sharon Smith	I	Retired	CHE			\$ 250.00
6	4080SE OLD ST. LUCIE BLVD STUART, FL 34994						
7 / 10 / 20	HAL Time	I	Retired	CHE			\$ 200.00
7	Circle Bay Club STUART, FL 34994						

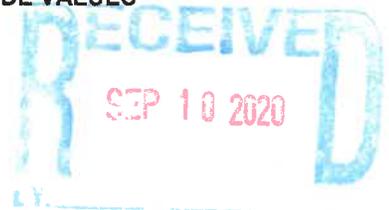


CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Edward B. GAVARRO (2) I.D. Number _____

(3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (4) Page 2 of 2

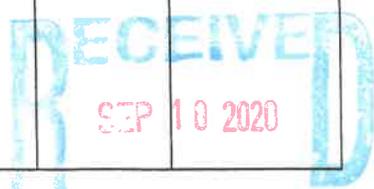
(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
7 / 1 / 20	Mike Spots 300 Colorado Stuart, FL	I	attorney	CHE		ADD	\$300
7 / 1 / 20	Svetlana Nimeroff 101 SE Ocean Dr Stuart, FL 34999	I	attorney	CHE		ADD	\$100
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name EDWARD B. GACARRE (2) I.D. Number _____
 (3) Cover Period 6 / 21 / 20 through 7 / 10 / 20 (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					
7 / 8 / 20	SM Kinnane Corp - 310 Denver Ave. Stuart, FL 34994	Printing and mailing expense	Campaign Literature Signs + Posters		\$5666.00
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CAMPAIGN LOANS REPORT ITEMIZED

Page 1 of 1

(PLEASE TYPE)

FULL NAME AND ADDRESS OF LENDER:

Edward B. Galante
800 NW Park Rd 5-P
STUART, FL 34994

OCCUPATION: Attorney

AMOUNT OF LOAN: \$1666.00

DATE RECEIVED: 7/8/20

FULL NAME AND ADDRESS OF LENDER:

OCCUPATION: _____

AMOUNT OF LOAN: _____

DATE RECEIVED: _____

FULL NAME AND ADDRESS OF LENDER:

OCCUPATION: _____

AMOUNT OF LOAN: _____

DATE RECEIVED: _____

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OCCUPATION: _____

AMOUNT OF LOAN: _____

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OCCUPATION: _____

AMOUNT OF LOAN: _____

DATE RECEIVED: _____

FULL NAME AND ADDRESS OF LENDER:

OCCUPATION: _____

AMOUNT OF LOAN: _____

DATE RECEIVED: _____

