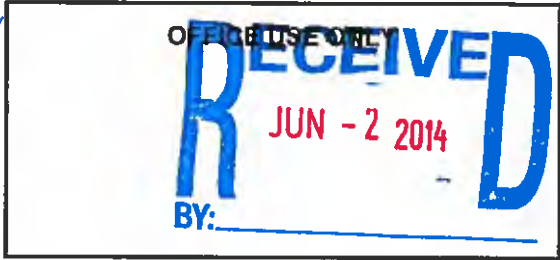


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) TOM CAMPENNI FOR STUART CITY
Name Commissioner

(2) 700 SW SAINT LUCIE CRES
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 COMMISSIONER GROUP 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 05 / 12 / 14 To 05 / 31 / 14 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , 10 , 000 . 00

Total Monetary \$ _____ , 10 , 000 . 00

In-Kind \$ _____ , _____ , _____ . _____

(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

\$ _____ , 10 , 000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 0 . _____

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

Mary R Sawyer
Signature

(Type name) TOM CAMPENNI
 Candidate Chairperson (only for PC and PTY)

T. Campenni
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name TOM CAMPELLI (2) I.D. Number _____

(3) Cover Period 05 / 12 / 14 through 05 / 31 / 14 (4) Page 1 of 1

(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		Amount
05 / 12 / 14	CAMPPELLI, TOMAS 700 SW ST. LUCIE CASH STUART FL 34994	S	R.E. CON.	HOA			10,000.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							