

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) THOMAS W. DORSETT  
Name

(2) 4760 SW 26th  
Address (number and street)

WESTPARK FL. 33023  
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

*Handwritten:*  
8-7-14

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

(4) Check appropriate box(es):

Candidate Office Sought: COMMISSIONER CITY OF WESTPARK

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 7 / 1 / 14 To 7 / 31 / 14 Report Type: M7

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ 625.00, \_\_\_\_\_

Loans \$ 0, \_\_\_\_\_

Total Monetary \$ 625.00, \_\_\_\_\_

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

\$ 1264.00, \_\_\_\_\_

### (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) SHARON BOWE

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

X Sharon Bowe  
Signature

(Type name) THOMAS DORSETT

Candidate  Chairperson (only for PC and PTY)

X Thomas Dorsett  
Signature

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

(1) Name THOMAS W DORSETT (2) I.D. Number \_\_\_\_\_

(3) Cover Period 7 / 1 / 14 through 7 / 31 / 14 (4) Page \_\_\_\_\_ of \_\_\_\_\_

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Contributor Type	Occupation				
<u>6 / 21 / 14</u>		<u>NELSON PINDER 2632 MARQUISE COURT ORLANDO FL 32805</u>	<u>1</u>		<u>CHECK</u>			<u>25</u>
<u>7 / 16 / 2014</u>		<u>ACCLAIM MANAGEMENT INC 4360 W OAKLAND BLVD LAUDERDALE LAKE FL 33313</u>	<u>B</u>		<u>CHECK</u>			<u>100</u>
<u>8 / 6 / 14</u>		<u>BECKER &amp; POLIAKOFF ONE EAST BROWARD BLVD SUITE 1800 FT LAUDERDALE FL 33301</u>	<u>B</u>		<u>CHECK</u>			<u>500</u>
<u>  /   /   </u>								
<u>  /   /   </u>								
<u>  /   /   </u>								
<u>  /   /   </u>								