FLORIDA DEPARTMENT OF STATE DIVIDION OF STATE							
FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) WALLACE CLARK Name	OFFICE USE ONLY						
(2)931 WREN AVENU							
Address (number and street)	2 2						
MIAMI SPRINGS, FL 33/6 City, State, Zip Code	6						
☐ CHECK IF ADDRESS HAS CHANGED							
(4) Check appropriate box(es):  Candidate (office sought): MAYOR	(3) ID Number: SPR SPRANDED OF SCHECK IF PC HAS DISBANDED OF SCHECK IF CCE HAS DISBANDED OF S						
Political Committee	N Z						
☐ Committee of Continuous Existence	CHECK IF PC HAS DISBANDED						
Party Executive Committee	CHECK IF CCE HAS DISBANDED						
☐ Electioneering Communication ☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED							
(5) REPOR	T IDENTIFIERS						
Cover Period: From 14/01/2011 To 7/05/2011 Report Type							
Original							
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$	Monetary \$ 1,625.00						
Loans \$ <u>587.00</u>	Transfers to Office Account						
Total Monetary \$	Total						
	Monetary \$						
In-Kind \$							
	(8) Other Distributions						
(9) TOTAL Monetary Contributions To Date							
\$ 3422.33	(10) TOTAL Monetary Expenditures To Date \$3, 411. 34						
(11) CEDT	IFICATION						
(11) CERTIFICATION  It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)							
certify that I have examined this report and it is true, correct, and complete.	e, I certify that I have examined this report and it is true, correct, and complete.						
(Type name) DANA ESTABROOK	(Type name) (1) ALLACE (1 ARK						
Individual (only for electioneering commun.)	Candidate Chairperson (only for PC PTY &						
X base ortal	electioneering commun organization)						
Signature	Signature						

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name( <u>/</u>	JAUACE (	LA	RK	(;	2) I.D. Number		<del></del>
(3) Cover Period 4 / 0   / / 1 through 7 / 05 / // (4) Page of							
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		(8) contributor	(9) Contribution Type	(10)	(11)	(12)
6,11,11	WALLACE CLARK 931 WRENAVE MIAMI SPRINGS, FL 33166		Occupation	L6A	Description	Amendment	Amount 8587
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DS-DE 13 (Rev. 08/03)	SE	E REV	ERSE FOR IN	STRUCTIONS	AND CODE VALU		

## **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES** (1) Name WALLACE CLARK (2) I.D. Number (3) Cover Period 4/01 / // through 7 / 05 / // (4) Page \_\_\_\_\_ of (7) (8) (5) (9) (10) (11) Date **Full Name Purpose** (Last, Suffix, First, Middle) (add office sought if (6) Street Address & contribution to a **Expenditure** Sequence City, State, Zip Code **Type** candidate) Number Amendment **Amount** RIVERCITIES GAZETIE POLITICAL MON \$ 1000 RIVERCITIES GAZETTE POLITICAL MON