

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) William Charlie Latham

Name

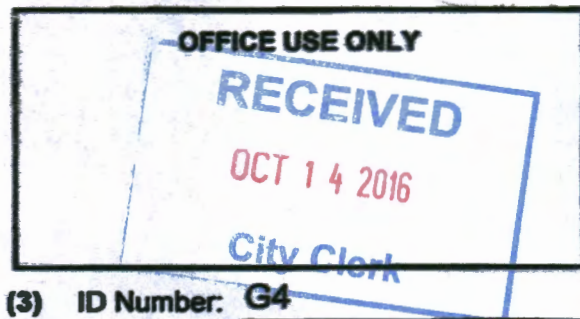
(2) 2016 Gail Street

Address (number and street)

Jacksonville Beach, FL 32250

City, State, Zip Code

Check here if address has changed



(3) ID Number: G4

(4) Check appropriate box(es):

Candidate Office Sought: City Council Seat, Jacksonville Beach, Mayor At Large

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 10 / 01 / 2016 To 10 / 07 / 2016 Report Type: G4

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0.00, ____, ____ . ____

Loans \$ ____, ____, ____ . ____

Total Monetary \$ 0.00, ____, ____ . ____

In-Kind \$ ____, ____, ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 0.00, ____, ____ . ____

Transfers to Office Account \$ ____, ____, ____ . ____

Total Monetary \$ 0.00, ____, ____ . ____

(8) Other Distributions

\$ ____, ____, ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 40,656.44, ____, ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 14,283.42, ____, ____ . ____

(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) Michael T. Bruce

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

X

Signature

(Type name) William Charlie Latham

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name William Charlie Lathan

(2) I.D. Number G4

(3) Cover Period 10 / 01 / 2016 through 10 / 07 / 2016

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
/ /	N/A						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name William Charlie Lathan

(2) I.D. Number C4

(3) Cover Period 10 / 01 / 2016 through 10 / 07 / 2016

(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					
// /	N/A				
// /					
// /					
// /					
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// /					
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