

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Wilson for Vero Council

Name

(2) P.O. Box 651114

Address (number and street)

Vero Beach, FL 32965

City, State, Zip Code

Check here if address has changed

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

OFFICE USE ONLY

RECEIVED BY \_\_\_\_\_

2021 SEP 13 AM 10:40

(4) Check appropriate box(es):

Candidate Office Sought: Vero Beach City Council

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 8 / 1 / 21 To 8 / 31 / 21 Report Type: MR

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ 0

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

Total Monetary \$ \_\_\_\_\_ 0

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

\$ \_\_\_\_\_ 0

### (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) Charles R. Wilson

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

[Signature]

Signature

(Type name) Charles R. Wilson

Candidate  Chairperson (only for PC and PTY)

[Signature]

Signature

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

(1) Name Wilson for Vero Council (2) I.D. Number \_\_\_\_\_

(3) Cover Period 8 / 1 / 21 through 8 / 31 / 21 (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	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
/ /							
/ /							
/ /	WAS NOT A CANDIDATE IN THIS PERIOD.						
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Wriser for Ward Council

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 8/1/21 through 8/31/21

(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
///		- 0 -			
///					
///		WAS NOT A CANDIDATE IN THIS TIME PERIOD			
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