

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Wilson for Council (Charlie Wilson)
 Name
 (2) 1875 Cobble Dr # 105
 Address (number and street)
Vero Beach, FL 32960
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: VERO Council
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10 / 16 / 21 To 10 / 28 / 21 Report Type: G3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, 200.00

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, 1,040.00

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 6,625.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 6,538.00

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

X [Signature]
 Signature

(Type name) C.R. Wilson
 Candidate Chairperson (only for PC and PTY)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Wilson For Council (2) I.D. Number _____

(3) Cover Period 10 / 16 / 21 through 10 / 28 / 21 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9)	(10)	(11)	(12)
		Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
10 / 20 / 21	Tom Mateas 345 IR. Dr. E. New Beach, FL. 32963	C	Real Estate	ck			\$100.00
10 / 25 / 21	Susan Aldrich 39 Cecile Ray Dr. 100 New Beach, FL 32963	C	Health Care	ck			\$100.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Wilson For Governor

(2) I.D. Number _____

(3) Cover Period 10/16/21 through 10/28/21

(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
(6) Sequence Number					
10/29/21	Use 32963 A/A Use Beach FL 32963	Ad			1,040.00
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