

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) SAMSON BORGELIN
 Name
 (2) 960 SW 81 TERRACE
 Address (number and street)
NORTH LAUDERDALE, FL 33068
 City, State, Zip Code

OFFICE USE ONLY

RECEIVED

AUG 23 2016

CITY NORTH LAUDERDALE

B.V.

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: NORTH LAUDERDALE COMMISSIONER DISTRICT D

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 07 / 01 / 16 To 07 / 31 / 16 Report Type: M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0.00, _____, _____

Loans \$ 0.00, _____, _____

Total Monetary \$ 0.00, _____, _____

In-Kind \$ 0.00, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ 0.00, _____, _____

Transfers to Office Account \$ 0.00, _____, _____

Total Monetary \$ 0.00, _____, _____

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ 2000.00, _____, _____

(10) TOTAL Monetary Expenditures To Date

\$ 1401.06, _____, _____

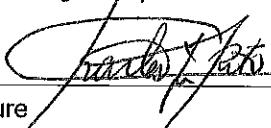
(11) Certification

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) JEAN F. CHARLES


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

X  10/18/2016

Signature

(Type name) SAMSON BORGELIN

Candidate Chairperson (only for PC and PTY)

X  8/23/2016

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name SAMSON BORGELIN

(2) I.D. Number M7

(3) Cover Period 07 / 01 / 16 through 07 / 31 / 16

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
/ /							
/ /							
/ /		I					
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S.B

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name SAMSON BORGELIN

(2) I.D. Number M7

(3) Cover Period 07 / 01 / 16 through 07 / 31 / 16

(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					
07 / 12 / 16	BANK OF AMERICA 7001 N UNIVERSITY DRIVE TAMARRAC, FL 33321	BANK FEES			
1			MON		19.00
07 / 06 / 16	BANK OF AMERICA 7001 N UNIVERSITY DRIVE TAMARRAC, FL 33321	BANK FEES			
2			MON		53.00

SB