

# CAMPAIGN TREASURER'S REPORT SUMMARY

(1) William V. Tudor  
Name

(2) [REDACTED]  
Address (number and street)  
Biscayne Park, FL 33161  
City, State, Zip Code

**OFFICE USE ONLY**

VILLAGE OF BISCAYNE PARK

RECEIVED

SEP 09 2016

Check here if address has changed

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

(4) Check appropriate box(es):

- Candidate Office Sought: Village of Biscayne Park Commissioner
- 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 / 16 To 8 / 31 / 16 Report Type: 2016-M8

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_, \_\_\_\_\_, 400.00

Loans \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 400.00

In-Kind \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, 20.00

Transfers to Office Account \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 20.00

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, 0.00

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, \_\_\_\_\_, 400.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, \_\_\_\_\_, 20.00

### (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) Leonor Benitez

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

X [Signature]  
Signature

(Type name) William Tudor

Candidate  Chairperson (only for PC and PTY)

X [Signature]  
Signature



VILLAGE OF BISCAYNE PARK

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

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(1) Name William V. Tudor

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

SEP 09 2016

(3) Cover Period 8 / 1 / 16 through 8 / 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	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
8, 26, 16	William Tudor [REDACTED] Biscayne Park, FL 33161	S	Examiner	CAS			400.00
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