

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MICHAEL TAUSSIG

Name

(2) 129 N.W. 73rd AVE

Address (number and street)

PLANTATION, FL. 33317

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

RECEIVED

OCT 25 2016

CITY CLERK'S OFFICE

(4) Check appropriate box(es):

Candidate Office Sought: PLANTATION CITY COUNCIL GROUP 3

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 / 8 / 16 To 10 / 21 / 16 Report Type: GC

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 200 -

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, 200 -

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 499 ⁰⁰/_X

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 499 ⁰⁰/_X

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 15,950 ⁰⁰/_X

(10) TOTAL Monetary Expenditures To Date

\$ _____, 2,205 ¹⁷/_X

(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 TAUSSIG

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

Michael Taussig
Signature

(Type name) MICHAEL TAUSSIG

Candidate Chairperson (only for PC and PTY)

Michael Taussig
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MICHAEL TAUSSIG CAMPAIGN (2) I.D. Number _____

(3) Cover Period 10/8/16 through 10/21/16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
10/13/16	BETTY COBB	I	RETIRED	CHE			\$200-
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name MICHAEL TAUSSIG CAMPAIGN

(2) I.D. Number _____

(3) Cover Period 10/8/16 through 10/21/16

(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					
10/11/16 4	USPS	POSTAGE	CAN		473 ⁵⁰
10/18/16 5	BROWARD S.O.E	CD VOTER LIST	CAN		25 ⁵⁰
11					
11					
11					
11					
11					
11					