

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) R. L Lewis
 Name
 (2) 6637 Sanders St
 Address (number and street)
Milton, RI 02570
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: 436

(4) Check appropriate box(es):

- Candidate Office Sought: City Councilman
- 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 / ~~10~~ / 21 / 16 To 10 / 28 / 16 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____

Loans \$ _____

Total Monetary \$ _____ 1795.00

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ 318.95

Transfers to Office Account \$ _____

Total Monetary \$ _____ 318.95

(8) Other Distributions

\$ _____ 135

(9) TOTAL Monetary Contributions To Date

\$ _____ 1795.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ 1135.95

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

x Cheryl Shaker
 Signature

(Type name) R. L. Lewis
 Candidate Chairperson (only for PC and PTY)

x R. L. Lewis
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name R. L. Lewis

(2) I.D. Number 436

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

(4) Page _____ of _____

(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
10/10/16	ROD, THE SIGN MAN 10016 NAVARRE, PKWY, NAVARRE, RI 02866	Yard Signs			258.26
10/25/16	UPS STORE #2284 60228 Hwy 90 MILTON, RI 02857	Door Cards			60.69
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name RL Lewis (2) I.D. Number 436

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

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

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) RL Lewis
 Name
 (2) 6637 Sanders rd
 Address (number and street)
Milton, FL 32576
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: 426

(4) Check appropriate box(es):

- Candidate Office Sought: City Councilman
- 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 / 14 / 16 To 10 / 21 / 16 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 100.00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 1795.00

In-Kind \$ _____ , _____ , 300.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 817.00

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 1795.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 817.00

(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) _____

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

Cheryl [Signature]

Signature

(Type name) RL Lewis

Candidate Chairperson (only for PC and PTY)

[Signature]

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name R. Lewis (2) I.D. Number 486

(3) Cover Period 10 / 14 / 16 through 10 / 21 / 16 (4) Page 1 of

(5) Date	(6) Sequence Number	(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
			Type	Occupation				
10 / 16 / 16		Bessie L. Coleman 6894 CHAFFIN ST MILTON, MA 02176			CHE			\$100 ⁰⁰
10 / 10 / 16		ALBERT GARDNER 11426 Red Jade Ct Upper Marlboro				RADIO BROAD CAST		300 ⁰⁰

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name R L Lewis

(2) I.D. Number 436

(3) Cover Period 10 / 14 / 16 through 10 / 21 / 16

(4) Page _____ of _____

(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					
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