

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) William Taylor Lapane

Name

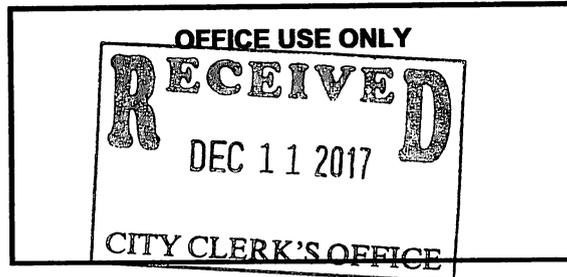
(2) 6421 S.W. 64th Street

Address (number and street)

South Miami, FL 33143

City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: South Miami Commissioner Group IV

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 12 /01 /2017 To 12 /08 /2017 Report Type: 02 G1

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 500 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 00 . 00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 500 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 00 . 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) William Taylor Lapane

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

X *William Taylor Lapane*
Signature

(Type name) William Taylor Lapane

Candidate Chairperson (only for PC and PTY)

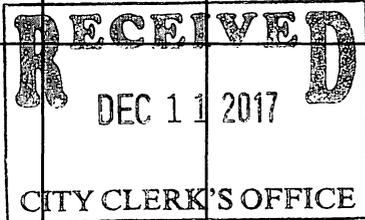
X *William Taylor Lapane*
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name William Taylor Lapane (2) I.D. Number _____

(3) Cover Period 12 / 01 / 2017 through 12 / 08 / 2017 (4) Page 1 of _____

(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				
12 / 4 / 2017	Franz, Cindy 6421 SW 64th Street South Miami, FL 33143	I	NA	CHE			250.00
12 / 4 / 2017	Lapane, William Taylor 6421 SW 64th Street South Miami, FL 33143	S	NA	CHE			250.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							



CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name William Taylor Lapane

(2) I.D. Number _____

(3) Cover Period 12 / 01 / 2017 through 12 / 08 / 2017

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

