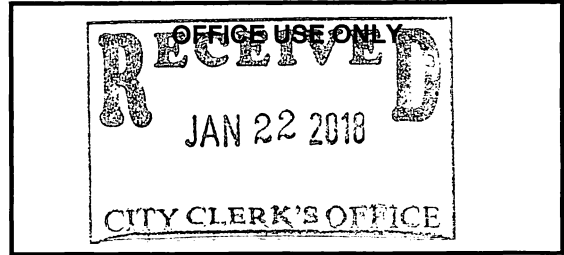


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) WALTER HARRIS
 Name
 (2) 7100 S.W. 64 COURT
 Address (number and street)
MIAMI, FL 33143
 City, State, Zip Code



Check here if address has changed

(3) ID Number: 77

(4) Check appropriate box(es):

- Candidate Office Sought: 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 1/13/18 To 1/19/18 Report Type: G-5

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 4,000.00

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 5.50

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 3,777.70

(10) TOTAL Monetary Expenditures To Date

\$ 2,669.00

(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) WALTER HARRIS

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

Walter Harris
 Signature

(Type name) WALTER HARRIS

Candidate Chairperson (only for PC and PTY)

Walter Harris
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name WALTER HARRIS

(2) I.D. Number 77 GRANT

(3) Cover Period 1/13/18 through 1/19/18

(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					
1/16/18	BB+T MERCHANT FEE PAY PAC	MERCHANT FEE	CAN		55 ⁰⁰
1					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name WALTER HARRIS (2) I.D. Number #77 Group IV

(3) Cover Period 1, 13, 18 through 1, 17, 18 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
1, 15, 18 1	KATRINA BUREHARDT 7750 SW 62 Ave MIAMI 33143			Pay Pal			50
1, 16, 18 2	BETH SCHWARTZ 6430 SW 62 Court MIAMI, FL 33143			Cash			50
1, 16, 18 3	JORGE DEL RIO 7011 SW 64 Ct MIAMI 33143			che			50
1, 17, 18 4	SUSAN CHESTWOOD 6612 TARRAGONA CORAL GABLES 33146		1st SECRETARY	Pay Pal			250
1 1							
1 1							
1 1							

