

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Maxwell B. Chambers
Name

(2) 16482 SW 18 Street
Address (number and street)

Miramar, FL 33027
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City Commission Seat 1

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 12 / 1 / 2015 To 12 / 31 / 2015 Report Type M12

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 14.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 14.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 50.00

(10) TOTAL Monetary Expenditures To Date

\$ 14.00

(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.

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(Type name) _____

(Type name) _____

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Maxwell B. Chambers

(2) I.D. Number _____

(3) Cover Period 12 / 1 / 2015 through 12 / 31 / 2015

(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					
12 / 31 / 15	Wells Fargo Bank, N.A. PO Box 6995 Portland , OR 97228	Bank Fees	MON	ADD	\$14.00
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