|            |   |           | CAM    | IPAI    | IGN     | TR        | EAS      | UR           | EF                  | R'S F                  | REP      | OR       | T S   | SUN           | MMARY                            |     |
|------------|---|-----------|--------|---------|---------|-----------|----------|--------------|---------------------|------------------------|----------|----------|-------|---------------|----------------------------------|-----|
| (1)        | Yvette Colb   | ourne     |        |         |         |           |          |              |                     |                        |          |          |       | C             | OFFICE USE ONLY                  |     |
| ` ,        | Name  |           |        |         |         |           |          |              |                     |                        | <u> </u> |          |       |               |                                  |     |
| (2)        | 9661 Mill Pond Road   |           |        |         |         |           |          |              | 11/10/20 - 08:30:36 |                        |          |          |       |               |                                  |     |
|            | Address (   |           | and s  | street  | )       |           |          |              |                     | \\\\\                  |          |          |       | By City Clerk |                                  |     |
|            | Miramar, FL<br>City, State  |           | ode    |         |         |           |          |              |                     |                        | -        |          |       |               |                                  |     |
|            | _   | -         |        | a har   | a a b a | . n a a a | İ        |              |                     |                        | (2)      | <b>\</b> | - Ni  | umb           | or                               |     |
| (4)        | ☐ Check   |           |        |         | S CIId  | ingeu     | l        |              |                     |                        | (3)      | , 11     | ואו כ | JIIID         | е                                |     |
| (4)        | Check app   | -         |        |         | ı. C    | City Co   | ommis    | sion         | Sea                 | at 2                   |          |          |       |               |                                  |     |
|            | <ul> <li>✓ Candidate Office Sought:</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul> |           |        |         |         |           |          |              |                     |                        |          |          |       |               |                                  |     |
|            |   |           |        |         |         |           | (5) F    | Repo         | ort I               | denti                  | fiers    | 5        |       |               |                                  |     |
| Cove       | er Period:  | From      | 10     | /       | 01      | /         | 20       | Т            | О                   | 10                     | /        | 31       | /     | 20            | Report Type: M-10                |     |
| <b>Ø</b> 0 | riginal   |           | Ame    | ndme    | nt      |           |          |              | Spec                | cial Ele               | ection   | n Rep    | ort   |               |                                  |     |
| (6)        | Contribut   | tions T   | his Re | port    |         |           |          |              |                     | (7)                    | Ex       | pen      | ditu  | res           | This Report                      |     |
| Casl       | n & Checks  | \$        |        | ,       | ,       | 800       | 0        | 0            |                     | Mone<br>Expe           | -        |          |       | \$_           |                                  | 4   |
| Loar       | ns  | \$        |        | ,       | _ ,     | 0         | 0        | 00           |                     | Trans<br>Office        |          |          | t     | \$            | , , 0 . 0                        | 0   |
| Tota       | l Monetary  | \$        |        | ,       | _ ,     | 800       | 0        | 00           |                     | Total                  | Mor      | netar    | у     | \$_           | , 2 , 440 . 6                    | 4   |
| In-Ki      | nd  | \$        |        | ,       | ,       | 0         | 0        | 00           |                     |                        |          |          |       |               |                                  |     |
|            |   |           |        |         |         |           |          |              |                     | (8)                    |          | ther     |       |               | utions                           |     |
|            |   |           |        |         |         |           |          |              |                     |                        | \$       |          |       | ,             | ,00                              |     |
| (9)        | TOTAL M   | onetar    | y Con  | tribu   | tion    | s To      | Date     |              |                     | (10)                   | TC       | DTAI     | L M   | onet          | tary Expenditures To Dat         | e   |
|            | \$  | _ ,8      | 5,     | 594     |         | 00        | _        |              |                     |                        | \$       |          |       | ,             | 4 , 731 . 64                     |     |
|            |   |           |        |         |         |           | - /4     | 4) 0         |                     | c·                     |          |          |       |               |                                  |     |
|            | It is   | a first ( | degree | misc    | deme    | anor      |          |              |                     | fication to f          |          | y a p    | ublic | c rec         | cord (ss. 839.13, F.S.)          |     |
| lo         | certify that I I  | have exa  | amined | d this  | repor   | t and     | it is tr | ue, c        | orre                | ct, and                | d con    | nplet    | e:    |               |                                  |     |
| /-         | ivne nama)  |           |        |         |         |           |          |              |                     | Tv                     | pe na    | ame)     |       |               |                                  |     |
|            | ype name) Individual (only  | y for IE  | ☐ Tre  | easurer | . [     | ] Depu    | ıty Trea | sure         |                     | 4-23                   | Candio   |          |       |               | ☐ Chairperson (only for PC and F | TY) |
|            | electioneering  |           |        |         |         |           |          | 100          |                     | AEC                    |          | <b>a</b> |       |               |                                  | •   |
| Х          |   |           |        |         |         |           | II -     | 3-49<br>10/2 |                     | -AB4:<br>08 <b>X</b> 3 |          | )        |       |               |                                  |     |
|            | gnature   |           |        |         |         |           | 4        | 1012         | Ų į                 |                        | gna.u    | 2        |       |               |                                  |     |

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

| (1) Name     | Y Vette C | Joibourr | ne   |      |         |    |     |     | (2) | I.D. Number |   |    |   | _ |
|--------------|-----------|----------|------|------|---------|----|-----|-----|-----|-------------|---|----|---|---|
| (3) Cover Pe | eriod     | 10       | , 01 | / 20 | through | 10 | , 3 | 1 / | 20  | (4) Page    | 2 | of | 3 |   |

|          |                                 | 1       |                   |              |             | 1                  |          |
|----------|---------------------------------|---------|-------------------|--------------|-------------|--------------------|----------|
| (5)      | (7)                             |         | (8)               | (9)          | (10)        | (11)               | (12)     |
| Date     | Full Name                       |         |                   |              |             |                    |          |
| (6)      | (Last, Suffix, First, Middle)   |         |                   | 0            |             |                    |          |
| Sequence | Street Address &                |         | ontributor        | Contribution | In-kind     | A ma a m den a m t |          |
| Number   | City, State, Zip Code           | Туре    | Occupation        | Туре         | Description | Amendment          | Amount   |
| 10 29 20 | Rodney Bacher                   |         | Accountant        | Check        |             |                    |          |
| / /      | <u> </u>                        |         |                   |              |             |                    |          |
| 2        | 11076 Helena DR.                | Individ |                   |              |             |                    | \$200.00 |
|          | Hollywood, FL 33026             |         |                   |              |             |                    |          |
|          | 11011y WOOd, 1 E 00020          |         |                   |              |             |                    |          |
| 40 00 00 | Mike Fawley                     |         | Civil             | Check        |             |                    |          |
| 10 29 20 | ,                               |         | Engineer          |              |             |                    |          |
| 2        | -                               | Individ |                   |              |             |                    | \$200.00 |
| 2        | 2518 Arbor Dr                   |         |                   |              |             |                    | •        |
|          | Ft Lauderdale, FL 33312         |         |                   |              |             |                    |          |
|          | Eric Jones                      |         | O'. II            | 01           |             |                    |          |
| 10 29 20 | Enc Jones                       |         | Civil<br>Engineer | Check        |             |                    |          |
| / /      | -                               | Individ | Engineer          |              |             |                    | \$150.00 |
| 3        | 8870 Southern Orchard           | maivia  |                   |              |             |                    | φ150.00  |
|          | RD S                            |         |                   |              |             |                    |          |
|          | Davie Fl 33328                  |         |                   |              |             |                    |          |
| 10 29 20 | Erin Riordan                    |         | Physician         | Check        |             |                    |          |
| 10 23 20 |                                 |         | Assistant)        |              |             |                    |          |
| 4        | 4440.1% 4                       | Individ |                   |              |             |                    | \$250.00 |
|          | 1113 Vintner Blvd               |         |                   |              |             |                    |          |
|          | Palm Beach Gardens,<br>FL 33410 |         |                   |              |             |                    |          |
|          | 11 .3.34 (1)                    |         |                   |              |             |                    |          |
| , ,      |                                 |         |                   |              |             |                    |          |
|          | -                               |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
| / /      | _                               |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
| / /      |                                 |         |                   |              |             |                    |          |
|          | 1                               |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          |                                 |         |                   |              |             |                    |          |
|          | 1                               |         | l                 |              |             |                    |          |

# **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

| (1) Name Yvette Colbourne             | (2) I.D. Number |            |      |
|---------------------------------------|-----------------|------------|------|
| (3) Cover Period 10 / 01 / 20 through | 10 , 31 , 20    | (4) Page 3 | of 3 |

|    | (5)                               | (7)   | (8)   | (9)                 | (10)      | (11)     |
|----|-----------------------------------|---|---|---------------------|-----------|----------|
|    | Date<br>(6)<br>sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount   |
| 10 | /01 /20                           | StrictlyWebsites.com  |   | Monetary            |           |          |
| 1  | / /                               | 14900 SW 30th St, Suite 277991<br>Miramar, FL 33027                                     |   |                     |           | \$995.32 |
| 10 | /14 /20                           | StrictlyWebsites.com  |   | Monetary            |           |          |
| 2  | /11/23                            | 14900 SW 30th St, Suite 277991<br>Miramar, FL 33027                                     |   |                     |           | \$995.32 |
| 10 | 04 (20                            | Lizca Francois  |   | Monetary            |           |          |
| 3  | / <sup>24</sup> / <sup>20</sup>   | 5521 SW 38th CT<br>West Park, FL 33023  |   |                     |           | \$450.00 |
|    | / /                               |   |   |                     |           |          |
|    | / /                               |   |   |                     |           |          |
|    | / /                               |   |   |                     |           |          |
|    | / /                               |   |   |                     |           |          |
|    | / /                               |   |   |                     |           |          |

|      | Instructions for Campaign Treasurer's Report Summary  |
|------|---|
| (1)  | <b>Name:</b> full name of the candidate, political committee, party executive committee, electioneering communications organization, or individual making an independent expenditure or electioneering communication.   |
| (2)  | Address: the full address or post office box, city, state, and zip code.  ☐ Check the box if the address has changed since the last report filed.   |
| (3)  | ID Number: identification number assigned by the filing officer.  |
| (4)  | Check the appropriate box(es).  |
| (5)  | Report Identifiers  Cover Period: the dates this report covers (i.e., From 1/1/15 To 1/31/55). Important: use the appropriate cover period dates as published by the filing officer.  Report Type: refer to the filing officer's calendar of reporting dates for the correct codes to be used for each reporting period. If report is for a special election add "S" in front of the report code (i.e., SG3).  Check one of the appropriate boxes:  Original: first report filed for this reporting period. |
|      | <ul> <li>□ Amendment: must summarize only contributions/fund transfers and expenditures/distributions being reported as additions or deletions. Read instructions for sequence numbers and amendment types on the back of Forms DS-DE 13A and 14A.</li> <li>□ Special Election Report: Important: once a special election report is filed, the entity is required to file all remaining reports due for the special election.</li> </ul>  |
| (6)  | Contributions This Report:  |
|      | Cash and Checks: total amount for this reporting period.  Loans: total amount for this reporting period.  Total Monetary: sum of Cash and Checks and Loans.  In-Kind: the fair market value of the in-kind contribution at the time it is given for this reporting period.  |
| (7)  | Expenditures This Report:   |
|      | Monetary Expenditures: total amount of monetary expenditures for this reporting period.  Transfers to Office Account: total amount transferred to an office account by <u>elected</u> candidates only.  Total Monetary: sum of Monetary Expenditures and Transfers to Office Account.   |
| (8)  | <b>Other Distributions:</b> the total amount of goods and services contributed to a candidate or other committee by a PC, ECO, or PTY.  |
| (9)  | <b>TOTAL Monetary Contributions To Date:</b> the amount of total monetary contributions to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.  |
| (10) | <b>TOTAL Monetary Expenditures To Date:</b> the amount of total monetary expenditures to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.  |
| (11) | Type or print the required officer's name and have them sign the report:  Candidate report: treasurer and candidate must sign.  PC report: treasurer and chairperson must sign.  PTY report: treasurer and chairperson must sign.  ECO report: organization's treasurer must sign.  IE or EC report: individual must sign (this applies when an individual acts alone to make these expenditures)   |
|      | AMENDMENT REPORTS: An amendment report summary should summarize only contributions, expenditures, distributions, & fund transfers being reported as additions or deletions. Read the instructions for the sequence number & amendment type fields on the back of forms DS-DE 13, 14, 14A and 94.  |

### INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

- (1) Candidate's full name or name of the political committee (PC), electioneering communications organizations (ECO) or party executive committee (PTY).
- (2) The identification number assigned by the filing officer.
- (3) Cover period dates (e.g., <u>1/1/15</u> through <u>1/31/15</u>). (See filing officer's reporting dates calendar for appropriate year and cover periods.)
- (4) Page numbers (e.g., <u>1</u> of <u>3</u>).
- (5) Date contribution was RECEIVED (Month/Day/Year).
- (6) **Sequence Number** Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting amendments.

  For example, a M1 report having 75 contributions would use sequence numbers 1 through 75. The next report (M2), comprised of 40 contributions would use sequence numbers 1 through 40. Contributions on amended M1 reports would begin with sequence number 76 and on amended M2 reports would begin with sequence number 41. See the *Amendment Type* instructions below.
- (7) Type full name and address of contributor (including city, state and zip code).
- (8) Enter the type of contributor using one of the following codes: Occupation of contributor for contributions over \$100 only. (If a business, please indicate nature of business.)

| I | Individual                                  |   |
|---|---|---|
| В | Business                                    | (also includes corporations, organizations, groups, etc.) |
| Е | Electioneering Communications Organizations |   |
| F | Political Committee                         | (federal or state)  |
| Р | Political Parties                           | (includes federal, state and county executive committees) |
| 0 | Other                                       | (e.g., candidate surplus funds to party, etc.)            |
| S | Candidate to Self                           |   |

(9) Enter Contribution Type using one of the following codes:

NOTE: Cash includes cash and cashier's checks.

| Code | Description                            |
|------|--|
| CAS  | Cash or Cashier's Check                |
| CHE  | Check                                  |
| COF  | Carryover Funds from Previous Campaign |
| INK  | In-Kind                                |
| INT  | Interest                               |
| LOA  | Loan                                   |
| MO   | Money Order                            |
| MUC  | Multiple Uniform Contributions         |
| RCT  | Other Receipts                         |
| REF  | Refund (Negative Amount Only)          |

- (10) Type the description of any in-kind contribution received.
  Candidate's Only If in-kind contribution is from a party executive committee and is allocable toward the contribution limits, type an "A" in this box. If contribution is not allocable, type an "N".
- (11) **Amendment Type** (required on amended reports) To add a new (previously unreported) contribution for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for contributions with amendment type "ADD" will start at one plus the number of contributions in the original report. For example, amending an original M1 report that had 75 contributions means the sequence number of the first contribution having amendment type "ADD" will be 76; the second "ADD" contribution would be 77, etc. When amending an original M2 report that had 40 contributions, the sixth "ADD" contribution would have sequence number 46.

To correct a previously submitted contribution use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the contribution to be corrected. In combination with the report number being amended, this sequence number will identify the contribution to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assign the sequence number as described above.

(12) Type amount of contribution received. Political Committees ONLY: Multiple uniform contributions from the same person, aggregating NMT \$250 per calendar year, collected by an organization that is the affiliated sponsor of a PC, may be reported by the PC in an aggregate amount listing the number of contributors together with the amount contributed by each and the total amount contributed during the reporting period. The identity of each person making such uniform contribution must be reported to the filing officer by July 1 of each calendar year, or, in a general election year, NLT the 60th day immediately preceding the primary election.

#### INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

- (1) Type candidate's full name or name of the political committee (PC), electioneering communications organization (ECO), or party executive committee (PTY).
- (2) Type identification number assigned by the filing officer.
- (3) Type cover period dates (e.g., <u>1/1/15</u> through 1/31/15). (See filing officer's reporting dates calendar for appropriate cover periods.)
- (4) Type page numbers (e.g.,  $\underline{1}$  of  $\underline{3}$ ).
- (5) Type date of fund transfer (Month/Day/Year).
- (6) Sequence Number Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting amendments.

For example, a M1 report having 2 fund transfers would use sequence numbers 1 thru 2. The next report (M2), comprised of 4 fund transfers would use sequence numbers 1 thru 4. Fund transfers on amended M1 reports would begin with sequence number 3 and on amended M2 reports would begin with sequence number 5. See the Amendment Type instructions below.

- (7) Type full name and address of financial institution (including city, state and zip code).
- (8) Enter Transfer Type using one of the following codes:

| DESCRIPTION   | CODE   |
|---|--------|
| Transfer FROM identified account to campaign account Transfer TO identified account from the campaign account | F<br>T |

- (9) Nature of Account (e.g., certificate of deposit, money market, etc...)
- (10) **Amendment Type** (required on amended reports) To add a new (previously unreported) fund transfer for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for fund transfers with amendment type "ADD" will start at one plus the number of fund transfers in the original report. For example, amending an original M1 report that had 75 fund transfers, means the sequence number of the first fund transfer having amendment type "ADD" will be 76; the second "ADD" fund transfer would be 77, etc. When amending an original M2 report that had 40 fund transfers, the sixth "ADD" fund transfer would have sequence number 46.

To correct a previously submitted fund transfer use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the fund transfer to be corrected. In combination with the report number being amended, this sequence number will identify the fund transfer to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assign the sequence number as described above.

(11) Type amount of fund transfer.

#### INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

- (1) Candidate's full name or name of the political committee (PC), electioneering communications organization (ECO), or party executive committee (PTY).
- (2) Identification number assigned by the filing officer.
- (3) Cover period dates (01/01/15 through 01/31/15). (See filing officer's reporting dates calendar for appropriate cover periods.)
- (4) Page numbers (e.g., <u>1</u> of <u>3</u>).
- (5) Date of expenditure (Month/Day/Year).
- (6) Sequence Number Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting requirements.

For example, a M1 report having 40 expenditures would use sequence numbers 1 through 40. The next report (M2), comprised of 30 expenditures would use sequence numbers 1 through 30. Expenditures on amended M1 reports would begin with sequence number 41 and on amended M2 reports would begin with sequence number 31. See *Amendment Type* instructions below.

- (7) Full name and address of entity receiving payment (including city, state and zip code).
- (8) Purpose of expenditure (if expenditure is a contribution to a candidate, also type the office sought by the candidate).

  PLEASE NOTE: This column does not apply to candidate expenditures, as candidates cannot contribute to other candidates from campaign funds. However, PCs (supporting candidates) and party executive committees contributing to candidates must report office sought (Section 106.07, F.S.).
- (9) Enter Expenditure Type using one of the following codes:

| Code | Description   |
|------|---|
| CAN  | Candidate Expense   |
| DIS  | Disposition of Funds  |
| DFC  | Disposition of Funds to Future Campaign (effective 11/1/13)       |
| DPP  | Disposition of Funds to Political Party (effective 11/1/13)       |
| DPV  | Disposition of Funds to Petition Verification (effective 11/1/13) |
| ECC  | Electioneering Communication                                      |
| IEC  | Independent Expenditure Regarding a Candidate                     |
| IEI  | Independent Expenditure Regarding an Issue                        |
| MON  | Monetary (Not to a Candidate)                                     |
| PCW  | Petty Cash Withdrawn  |
| PCS  | Petty Cash Spent  |
| PPD  | Pre-paid Distribution   |
| REF  | Refund (Negative Amount Only)                                     |
| RMB  | Reimbursements  |
| TOA  | Transfer to Office Account (Disposition of Funds)                 |

(10) **Amendment Type** (required on amended reports) - To add a new (previously unreported) expenditure for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for expenditures with amendment type "ADD" will start at one plus the number of expenditures in the original report. For example, amending an original M1 reports that had 75 expenditures, means the sequence number of the first expenditure having amendment type "ADD" will be 76; the second "ADD" expenditure would have sequence number 39.

To correct a previously submitted expenditure use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the expenditure to be corrected. In combination with the report number being amended, this sequence number will identify the expenditure to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assign the sequence number as described above.

(11) Amount of expenditure.

#### **CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS**

THIS FORM IS USED TO REPORT DISTRIBUTIONS OF GOODS OR SERVICES CONTRIBUTED TO A CANDIDATE OR COMMITTEE, INDIRECT EXPENDITURES AND REIMBURSEMENTS.

- (1) Name of the entity.
- (2) Identification number assigned by the filing officer.
- (3) Cover period dates (e.g., <u>03/01/14</u> through <u>03/31/14</u>). (See the filing officer's reporting dates calendar for appropriate cover periods.)
- (4) Page numbers (e.g.,  $\underline{1}$  of  $\underline{3}$ ).
- (5) Date of distribution (Month/Day/Year).
- (6) Sequence Number Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting amendments.

For example, a M1 report having 40 distributions would use sequence numbers 1 through 40. The next report (M2), comprised of 30 distributions would use sequence numbers 1 through 30. Distributions on amended M1 reports would begin with sequence number 41 and on amended M2 reports would begin with sequence number 31. See *Amendment Type* instructions below.

- (7) Full name and address of entity receiving distribution (including city, state and zip code).
- (8) Purpose of distribution (if distribution is a contribution to a candidate, also type the office sought by the candidate).
- (9) For each distribution that is related to an itemized expenditure previously listed on Itemized Expenditures (Form DS-DE 14), enter the Year, Report Type and Sequence Number associated with the expenditure.

\*PARTY EXECUTIVE COMMITTEES ONLY - If distribution is allocable toward the contribution limits, type an "A" in this box. If distribution is nonallocable, type and "N".

(10) **Amendment Type** (required on amended reports) - To add a new (previously unreported) distribution for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for distributions with amendment type "ADD" will start at one plus the number of distributions in the original report. For example, amending and original M1 report that had 75 distributions, means the sequence number of the first distribution having amendment type "ADD" will be 76; the second "ADD" distribution would be 77, etc. When amending an original M2 report that had 30 distributions, the ninth "ADD" distribution would have sequence number 39.

To correct a previously submitted distribution use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the distribution to be corrected. In combination with the report number being amended, this sequence number will identify the distribution to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assigns the sequence number as described above.

## (11) Amount of distribution.

(12) Distribution Type

| Code | Description           |
|------|-----------------------|
| PPD  | Pre-paid Distribution |
| RMB  | Reimbursements        |
| CCP  | Credit Card Purchase  |
| INK  | In-Kind Distribution  |