

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Scott Newton  
Name

(2) 1825 NE 27 Dr.  
Address (number and street)

Wilton Manors FL 33306  
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

18SEP24 2:04PM

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: City Commissioner
- 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 9 / 1 / 18 To 9 / 15 / 18 Report Type: G-2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ 1,100.00

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

### (7) Expenditures This Report

Monetary Expenditures \$ 0

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date

\$ 1,100.00

(10) TOTAL Monetary Expenditures To Date

\$ 4,610.04

### (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) Scott Newton

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

X [Signature]  
Signature

(Type name) Scott Newton

Candidate  Chairperson (only for PC and PTY)

X [Signature]  
Signature

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Scott Newton (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 9,1,18 through 9,15,18 (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					
///					
///		N/A			
///					
///					
///					
///					
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///					
///					

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

(1) Name Scott Newton (2) I.D. Number \_\_\_\_\_

(3) Cover Period 9 / 1 / 18 through 9 / 15 / 18 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
9 / 12 / 18	Benjamin Little	I	Ret.				100.00
1	PO Bx 5711 Ft. Lauderdale, FL						
9 / 14 / 18	1601 Management LLC	B	Senior Homes				1000.00
2	1601 NE 26 St. Ft. Lauderdale, FL						
/ /							
/ /							
/ /							
/ /							
/ /							