

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Scott Newton

Name

(2) [REDACTED]

Address (number and street)

Wilton Manors, FL 33306

City, State, Zip Code

Check here if address has changed

**OFFICE USE ONLY**

APR 11 '22 AM 8:07

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

(4) Check appropriate box(es):

Candidate Office Sought: Mayor

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 03 / 01 / 2022 To 03 / 31 / 2022 Report Type: M3

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,   1   , 000   . 00

Loans \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

In-Kind \$        ,        ,        .       

### (7) Expenditures This Report

Monetary Expenditures \$        ,        ,        . 00

Transfers to Office Account \$        ,        ,        .       

Total Monetary \$        ,        ,        .       

### (8) Other Distributions

\$        ,        ,        .       

### (9) TOTAL Monetary Contributions To Date

\$        ,   8   , 795   . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        ,   85   . 57

### (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

(Type name) Scott Newton

Candidate  Chairperson (only for PC and PTY)

**X**

Signature

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

(1) Name Scott Newton

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 03 / 01 / 2022 through 03 / 31 / 2022

(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					
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# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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(1) Name SCOTT NEWTON (2) I.D. Number \_\_\_\_\_

(3) Cover Period 03 / 01 / 2022 through 03 / 31 / 2022 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
03 / 23 / 2022 1	Wheelabrator South Broward 100 Arboretum Dr. Suite 310 Portsmouth, NH 03801	B	Sanitation	CHE			1000.00
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