

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

OFFICE USE ONLY  
**RECEIVED**

OCT 09 2015

**TOWN OF DAVIE**  
Town Clerk's Office



(1) Harlon Luis  
Name  
(2) 4733 Grapevine Way  
Address (number and street)  
Davie, Fla 33331  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

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

(4) Check appropriate box(es):

- Candidate (office sought): DIST. #4
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication

- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 09 / 01 / 2015 To 09 / 30 / 2015 Report Type M9

- Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ 500.00  
Loans    \$ \_\_\_\_\_  
Total Monetary    \$ 500.00  
In-Kind    \$ \_\_\_\_\_

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures    \$ \_\_\_\_\_  
Transfers to Office Account    \$ \_\_\_\_\_  
Total Monetary    \$ \_\_\_\_\_

**(8) Other Distributions**

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

**(9) TOTAL Monetary Contributions To Date**

\$ 2,600.00

**(10) TOTAL Monetary Expenditures To Date**

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

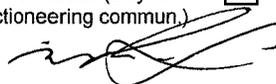
**(11) CERTIFICATION**

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)

- Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

**X** 

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

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

**X** 

Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Marlon Luis

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

(3) Cover Period 09 / 01 / 2015 through 09 / 30 / 2015

(4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
09 / 01 / 2015	M&F Partners Trust	B	Real Estate	CHE			500.00
/ /							
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