CAMPAIGN TREASURER'S REPORT SUMMARY							
Name (2) 3860 SW 60th Avenue Address (number and street) Davie, FL 33314 City, State, Zip Code Check here if address has changed (4) Check appropriate box(es):	OFFICE USE ONLY before Walled Sold Significant (3) ID Number:						
 ✓ Candidate Office Sought: Davie Town Council, district 1 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 							
•	Identifiers						
Cover Period: From 4 / 1 / 14 To							
✓ Original	ecial Election Report						
(6) Contributions This Report Cash & Checks \$,, _0 00	(7) Expenditures This Report Monetary Expenditures \$,,15 . 00						
Loans \$	Transfers to Office Account \$, , , 0 . 00						
In-Kind \$	Total Monetary \$, , _1500						
	(8) Other Distributions \$, , 0 . 00						
(9) TOTAL Monetary Contributions To Date \$, 6 _ ,00000	(10) TOTAL Monetary Expenditures To Date \$, 3_ , _39876						
(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) Bryan Caletka ☐ Individual (only for IE	(Type name) Bryan Caletka ☑ Candidate ☐ Chairperson (only for PC and PTY)						
or electionsering comm.)							
Signature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Bryan Caletka (2) I.D. Number						
(3) Cover Period	///	through/	30 / 14	_ (4) Page		of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Contributor	(9)	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Type Occupation	Type	Description	Amendment	Amount
1 1	Nothing to report					
1 1						
1 1						
1 1						
1 1						
1 1						
1 1						

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Bryan	CAMPAIGN TREASURER'S REPORT — ITEMIZED EXPENDITURES (2) I.D. Number							
(3) Cover Perio	d 4 / 1 / ¹⁴ through				1			
(5) Date (6) Sequence Number	(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)	(11) Amount			
4 /17 / 14	Chase Bank 6529 Nova Drive Davie, FL 33317	Account fees	MOM		\$15.00			
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