

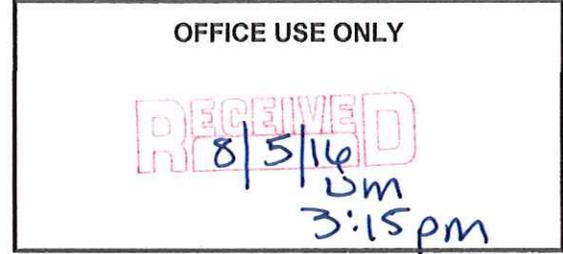
## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Mike Churen  
Name

(2) 407 Miriam Ave.  
Address (number and street)

Holly Hill, FL 32117  
City, State, Zip Code

Check here if address has changed



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

(4) Check appropriate box(es):

- Candidate    Office Sought: District 1 City Commissioner of Holly Hill
- 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 7/23/16 To 7/29/16 Report Type: P4

- Original     Amendment     Special Election Report

### (6) Contributions This Report

Cash & Checks    \$ \_\_\_\_\_, \_\_\_\_\_, 210.00

Loans    \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

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

In-Kind    \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures    \$ \_\_\_\_\_, \_\_\_\_\_, 13.84

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

Total Monetary    \$ \_\_\_\_\_, \_\_\_\_\_, 13.84

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, \_\_\_\_\_, \$895.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, \_\_\_\_\_, \$596.34

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

X Karen Churen  
Signature

(Type name) Mike Churen  
 Candidate     Chairperson (only for PC and PTY)

X [Signature]  
Signature

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

**RECEIVED**  
 8/5/16  
 UM  
 3:15 PM

(1) Name Mike Chuvon

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

(3) Cover Period 7, 23, 16 through 7, 29, 16

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
7, 23, 16	Jim Legary	I	Paving Co owner	CAS			\$200.00
1	342 Burkley Ave Holly Hill, FL 32117						
7, 23, 16	Karen Chuvon	I	caseworker	CAS			\$10.00
2	407 miriam Ave Holly Hill FL 32117						
1 1							
1 1							
1 1							
1 1							
1 1							

RECEIVED  
8/5/16  
LM  
3:15pm

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Mike Chuver

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

(3) Cover Period 7, 23, 16 through 7, 29, 16

(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					
7/23/16	Office Depot 1560 S. Nova Rd. Daytona Beach, FL 32114	Labels	CAN		\$13.84
1					
//					
//					
//					
//					
//					
//					
//					
//					