

# CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

(1) JUSTIN FLIPPEN  
Name

(2) 1152 NW 30 CT, UNIT 310  
Address (number and street)

WILTON MANORS, FL 33311  
City, State, Zip Code

Check here if address has changed

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

17 NOV 30 10

(4) Check appropriate box(es):

Candidate Office Sought: WILTON MANORS 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 11 / 1 / 17 To 11 / 30 / 17 Report Type: \_\_\_\_\_

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 00

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

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

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

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

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

### (8) Other Distributions

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

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 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) JUSTIN FLIPPEN

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

X Justin S. Flippen  
Signature

(Type name) JUSTIN FLIPPEN

Candidate  Chairperson (only for PC and PTY)

X Justin S. Flippen  
Signature

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

17NW30

(1) Name JUSTIN FLIPPEN (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 1 / 17 through 11 / 30 / 17 (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	Type	Description		Amount
11 / 30 / 17	JUSTIN FLIPPEN 1152 NW 30 CT UNIT 310 WILTON MANORS, FL 33311	S	CANDIDATE	LOA			100.00
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/ /							
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