

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

OFFICE USE ONLY

(1) Johnny Chassie Campaign Act
Name

(2) 123 W Main St
Address (number and street)

Leesburg FL 34748
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City Commissioner at Large

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous Existence CHECK IF CCE HAS DISBANDED

Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 29 / 10 To 1 / 31 / 11 Report Type FINAL

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0 \$100.00

Loans \$ _____

Total Monetary \$ 0 \$100.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 228.66

Transfers to Office Account \$ _____

Total Monetary \$ 228.66

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date \$ 3750.00

(10) TOTAL Monetary Expenditures To Date \$ 3750.00


(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) GENE CRIPPEN


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) Johnny Chassie

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

X 
Signature

CAMPAIGN TRF SURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Johnny Chassie Campaign Acct (2) I.D. Number _____

(3) Cover Period 10 / 29 / 10 through 1 / 31 / 11 (4) Page _____ of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description	Amendment	Amount
12 / 10	City of Leesburg 501 W Meadow St Leesburg FL 34748	Individual		Check			100.00 returned Deposit
001							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Johnny Chassie Campaign acct

(2) I.D. Number _____

(3) Cover Period 10/29/10 through 1/31/11

(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
12/6/10	United Southern Bank 515 W Main St Leesburg FL 34748		Dis		11.95
12/27/10	Youth Challenge 4738 NE 49th BV Wildwood FL 34785		Dis		216.71
1/6/11	Acct Closed Bal 0				0
1/1					
1/1					
1/1					
1/1					
1/1					