

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jeff Gow  
Name

(2) 1140 Mary Jane Ln  
Address (number and street)

Dunedin, FL 34698  
City, State, Zip Code

OFFICE USE ONLY  
RECEIVED

OCT 19 2018

OFFICE OF THE CITY CLERK

Check here if address has changed

(3) ID Number: 10717093

(4) Check appropriate box(es):

Candidate Office Sought: Dunedin City Commission

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 10/6/18 To 10/12/18 Report Type: 6518

Original       Amendment       Special Election Report

(6) Contributions This Report

Cash & Checks      \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

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

Total Monetary      \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

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

(7) Expenditures This Report

Monetary Expenditures      \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

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

Total Monetary      \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

(8) Other Distributions  
\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date  
\$ \_\_\_\_\_, 5,833.00

(10) TOTAL Monetary Expenditures To Date  
\$ \_\_\_\_\_, 3,959.34

### (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) Jeff Gow

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

X Jeff Gow  
Signature

(Type name) Jeff Gow

Candidate     Chairperson (only for PC and PTY)

X Jeff Gow  
Signature

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

(1) Name Julia Gow

(2) I.D. Number 10717093

(3) Cover Period 10 / 6 / 15 through 10 / 12 / 18

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
/ /							
/ /							
/ /							
/ /							
/ /							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Juste Low

(2) I.D. Number 10717093

(3) Cover Period 10/6/18 through 10/12/18

(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					
/ /					
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