

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Amy Rosen  
 Name  
 (2) 5427 SW 120 Avenue  
 Address (number and street)  
Cooper City, FL 33330  
 City, State, Zip Code

**OFFICE USE ONLY**

08-10-16P03:39 RCVD

Check here if address has changed

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

(4) Check appropriate box(es): Cooper City Commissioner, District 4

Candidate    Office Sought: \_\_\_\_\_

Political Committee (PC)

Electioneering Communications Org. (ECO)     Check here if PC or ECO has disbanded

Party Executive Committee (PTY)     Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications)     Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 07 / 01 / 2016 To 07 / 31 / 2016 Report Type: M7

Original     Amendment     Special Election Report

**(6) Contributions This Report**

Cash & Checks    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 01

Loans    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 100.00

Total Monetary    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 100.01

In-Kind    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 0

**(7) Expenditures This Report**

Monetary Expenditures    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 0

Transfers to Office Account    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 0

Total Monetary    \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 0

**(8) Other Distributions**

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 0

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . ~~100.01~~ 320.01  
*cc*

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . 220.00

### (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:

Cathy Cormier  
 (Type name)

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

X *Catherine Cormier*  
 Signature

Amy Rosen  
 (Type name)

Candidate     Chairperson (only for PC and PTY)

X *Amy Rosen*  
 Signature

(1) Name Amy Rosen (2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 01 / 2016 through 07 / 31 / 2016 (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							
07 / 28 / 2016 1	Rosen, Amy 5427 SW 120 Avenue Cooper City, FL 33330	S		LOA			\$ 100.00
07 / 28 / 2016 2	Rosen, Amy 5427 SW 120 Avenue Cooper City, FL 33330	S		CAS			\$ 0.01
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Amy Rosen

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

(3) Cover Period 07 / 01 / 2016 through 07 / 31 / 2016

(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					
07 / 08 / 2016  1	Regions Bank/Harland Clarke Checks 9100 Griffin Road Cooper City, FL 333328	Harland Clark Check Orders Amy L Rosen CA	MON		\$ 44.22
07 / 11 / 2016  2	Regions Bank/Harland Clarke Checks 9100 Griffin Road Cooper City, FL 333328	Bank Credit Fee Refund for Check Orders Amy L Rosen CA	REF		(\$- 44.22)