

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

(1) Jeri Muoio Campaign Committee  
**Name**  
 (2) 10130 Northlake Blvd., Suite 214, PMB 181  
**Address (number and street)**  
West Palm Beach, FL 33412  
**City, State, Zip Code**

**OFFICE USE ONLY**

CHECK IF ADDRESS HAS CHANGED

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

**(4) Check appropriate box(es):**

- Candidate (office sought): West Palm Beach City Commissioner
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication
- CHECK IF PC HAS DISBANDED
- CHECK IF CCE HAS DISBANDED
- CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 07 / 01 / 08 To 09 / 30 / 08 Report Type Q3

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ 500.00  
 Loans    \$ \_\_\_\_\_  
 Total Monetary    \$ 500.00  
 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**

\$ 500.00

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

\$ 0.00

**(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)

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)

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

**X**  
 \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Jeri Muoio Campaign Committee

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

(3) Cover Period 07 / 01 / 08 through 09 / 30 / 08

(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							
09 / 29 / 08	Muoio, Geraldine 7125 Eagle terrace West Palm Beach, FL 33412	I	Educator	CHE			500.00
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## CAMPAIGN TREASURER'S REPORT -- ITEMIZED EXPENDITURES

(1) Name Jeri Muoio Campaign Committee

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

(3) Cover Period 07 / 01 / 08 through 09 / 30 / 08

(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
/ /	NOTHING TO REPORT ON THIS FORM.				
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