

CAMPAIGN TREASURER'S REPORT SUMMARY

RECEIVED

OFFICE USE ONLY

JUN 13 2016

CITY OF WEST PALM BEACH
OFFICE OF THE CITY CLERK

(1) Ricky Aiken
Name

(2) 505 15th Street
Address (number and street)
West Palm Beach, FL 33401
City, State, Zip Code

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: West Palm Beach City Commissioner Dist 1
- 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 3 / 23 / 16 To 6 / 13 / 16 Report Type: TR

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . _____

Loans \$ _____ , _____ , 0 . _____

Total Monetary \$ _____ , _____ , 0 . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 22 . 16

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 480 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 2 , 480 . 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) Ricky Aiken
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Ricky Aiken
Signature

(Type name) Ricky Aiken
 Candidate Chairperson (only for PC and PTY)

X Ricky Aiken
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ricky Aiken (2) I.D. Number _____

(3) Cover Period 3 / 11 / 16 through 6 / 13 / 16 (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
4 / 15 / 16	Wells Fargo Bank	Service fees			22.16
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