

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) BOB McCABE
 Name
 (2) 4049 OCEAN DRIVE # 506
 Address (number and street)
VERO BEACH, FL. 32963
 City, State, Zip Code

OFFICE USE ONLY
 RECEIVED BY
 CITY CLERK'S OFFICE
 2020 OCT 23 AM 11:14

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: VERO BEACH CITY COUNCIL
 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 10 / 3 / 20 To 10 / 16 / 20 Report Type: G2
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$	<u>1,025.00</u>
Loans	\$	_____
Total Monetary	\$	<u>1,025.00</u>
In-Kind	\$	_____

(7) Expenditures This Report

Monetary Expenditures	\$	<u>1,270.65</u>
Transfers to Office Account	\$	_____
Total Monetary	\$	<u>1,270.65</u>

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 3,950.00

(10) TOTAL Monetary Expenditures To Date
 \$ 2,658.65

(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) BOB McCABE
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
 X Robert Gludabe
 Signature

(Type name) BOB McCABE
 Candidate Chairperson (only for PC and PTY)
 X Robert Gludabe
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name BOB LACABE (2) I.D. Number _____

(3) Cover Period 10 / 3 / 20 through 10 / 16 / 20 (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11)	(12)
		Type	Occupation	Type	Description	Amendment	Amount
10, 3, 20	BYRNES LAW 4049 OCEAN #102 VERO BEACH, FL 32963	B	LAW	CHE	-		300.00
10, 3, 20	KENNETH CUCCARO 4049 OCEAN #204 VERO BEACH, FL 32963	I	CONTRACTOR	CHE			250.00
10, 6, 20	VEROBISACH.COM 1920 BAREFOOT VERO BEACH FL 32963	B	PUBLICA -TION	CHE			100.00
10, 6, 20	SHARON HATALA 546 MONEY SUCKER VERO BEACH, FL 3296	I	RETIRED	CHE			100.00
10, 12, 20	THOMAS BELL 4049 OCEAN DR #302 VERO BEACH, FL 32963	I	TEACHER	CHE			50.00
10, 12, 20	VALERIE GIVVEN 4049 OCEAN #205 VERO BEACH, FL 32963	I	RETIRED	CHE			50.00
10, 12, 20	HELEN BOLL 4049 OCEAN #401 VERO BEACH, FL 32963	I	RETIRED	CHE			50.00

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name BOB McCABE (2) I.D. Number _____

(3) Cover Period 10 / 3 / 20 through 10 / 16 / 20 (4) Page 2 of 2

(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		Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
10 / 12 / 20	CARMINE D'ASCIANO 4049 OCEAN #502 VERO BEACH, FL 32963	I	RETIRED	CHE			125.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

TOTAL \$ 1,025.00

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name BOB MCCABE

(2) I.D. Number _____

(3) Cover Period 10 / 3 / 20 through 10 / 16 / 20

(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
10 / 6 / 20	MOORIER, DAVID 2586 2ND STREET VERO BEACH, FL 32962	GRAPHICS AD	CASH		400.00
10 / 16 / 20	VERO'S VOICE 95 ROYAL PALM POINTE VERO BEACH, FL. 32960	AD	CASH		500.00
10 / 8 / 20	MINUTEMAN PRESS 983 12TH STREET VERO BEACH, FL 32960	PRINTING	CASH		315.65
10 / 3 / 20	US POST OFFICE 1551 US HWY 1 VERO BEACH, FL 32960	STAMPS	CASH		55.00
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TOTAL \$ 1,270.65

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name BOB McCABE (2) I.D. Number _____

(3) Cover Period 10/3/20 through 10/16/20 (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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
1 / 1	NA					
1 / 1						
1 / 1						
1 / 1						
1 / 1						
1 / 1						
1 / 1						
1 / 1						
1 / 1						