

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Jay Scharf  
 Name  
 (2) 225 Dunbar Road  
 Address (number and street)  
Palm Beach, FL 33480  
 City, State, Zip Code

OFFICE USE ONLY

RECEIVED

2014 JAN 3 14:38 TOWN CLERK

Check here if address has changed

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

(4) Check appropriate box(es):  
 Candidate Office Sought: Palm Beach Town Council Group 1  
 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 12 /14 /13 To 12 /27 /13 Report Type: 2014 G2

Original  Amendment  Special Election Report

**(6) Contributions This Report**

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

Loans \$ \_\_\_\_\_ , 50,000 . 00

Total Monetary \$ \_\_\_\_\_ , 50,000 . 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**  
 \$ \_\_\_\_\_ , 50,000 . 00

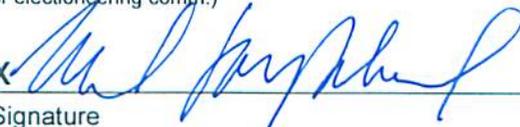
**(10) TOTAL Monetary Expenditures To Date**  
 \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

### (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) Michael Jay Scharf  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X   
 Signature

(Type name) Michael Jay Scharf  
 Candidate  Chairperson (only for PC and PTY)

X   
 Signature

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

(1) Name Michael Jay Scharf (2) I.D. Number \_\_\_\_\_

(3) Cover Period 12 / 14 / 13 through 12 / 27 / 13 (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		Type	Occupation	Type	Description		
12, 27 13	Scharf, Michael, Jay 225 Dunbar Road Palm Beach, FL 33480	LOA		LOA			\$50,000.00
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