

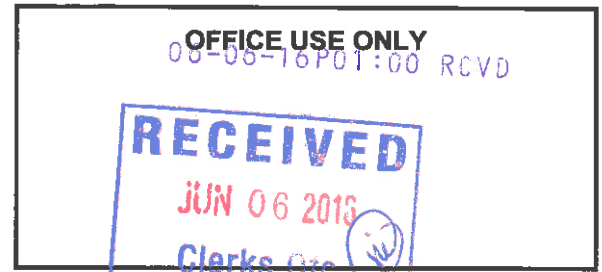
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael P. Callahan
Name

(2) 9280 Caribbean Blvd
Address (number and street)

Cutler Bay Fl 33157
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Town Council Seat #2
- 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 05 / 01 / 16 To 05 / 31 / 16 Report Type: 2016-M05

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 \$ _____ , _____ , _____ . 12.00

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 600 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 192 . 20

(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) David Houtz

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

X
Signature

(Type name) Michael P. Callahan

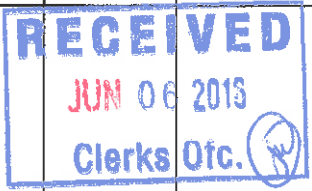
Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Michael P. Callahan **(2) I.D. Number** 2016-M05
(3) Cover Period 05 / 01 / 2016 through 05 / 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
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							



06-06-16P01:00 RCVD

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael P. Callahan

(2) I.D. Number 2016-M05

(3) Cover Period 05 / 01 / 2016 through 05 / 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
05 / 29 / 16	Sunstate bank 20351 Old Cutler RD Cutler bay Fl. 33189	Service Charge	CAN		12.00
001					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

RECEIVED
 JUN 06 2016
 Clerks Ofc.

06-06-16P01:00 RCVD