

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Citizens for Good Government

Name _____

(2) 525 N. Ocean Blvd. # 1722

Address (number and street) _____

POMPANO BEACH, FLORIDA 33064

City, State, Zip Code _____

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

RECEIVED

By City Clerk's Office at 3:50 pm, Jul 09, 2020

(4) Check appropriate box(es):

Candidate Office Sought: _____

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 06 / 01 / 2020 To 06 / 30 / 2020 Report Type: M6

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . 00

In-Kind \$ _____ , _____ , _____ . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . 10. 00

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

Total Monetary \$ _____ , _____ , _____ . 10 00

(8) Other Distributions

\$ _____ , _____ , _____ . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 6 , 396 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 6 , 389 . 37

(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) Doug Borden

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

X D.B. Borden

Signature

(Type name) Doug Borden

Candidate Chairperson (only for PC and PTY)

X D.B. Borden

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name CITIZENS FOR GOOD GOVERNMENT (2) I.D. Number _____

(3) Cover Period 06 / 01 / 2020 through 06 / 30 / 2020 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
6 / /	6						
01							\$
/ /							
02							\$
/ /							
03							
/ /							
04							
/ /							
05							
/ /							
06							
/ /							
07							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CITIZENS FOR GOOD GOVERNMENT

(2) I.D. Number _____

(3) Cover Period 06 / 01 / 2020 through 06 / 30 / 2020

(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
(6) Sequence Number					
// / 01	PNC Bank Lighthouse Point, Florida 33062	Bank Charges	IEI		\$10.00
// / 02					
// / 03					\$
// / 04					\$
// / 05					
// /					
// /					
// /					