

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Citizens for Good Government

Name

(2) 3160 NW 1 AVENUE

Address (number and street)

POMPANO BEACH, FLORIDA 33064

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

RECEIVED

By Asceleta Hammond at 9:00 am, Apr 06, 2021

(3) ID Number: _____

(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 03 / 01 / 2021 To 03 / 31 / 2021 Report Type: M3

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 \$ _____, _____, 9 . 00

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

Total Monetary \$ _____, _____, 9 . 00

(8) Other Distributions

\$ _____, _____, _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 16, 640 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 14, 647 . 99

(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) Thomas Terwilliger

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

[Handwritten Signature]

Signature

(Type name) Thomas Terwilliger

Candidate Chairperson (only for PC and PTY)

[Handwritten Signature]

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CITIZENS FOR GOOD GOVERNMENT

(2) I.D. Number _____

(3) Cover Period 03 / 01 / 2021 through 03 / 31 / 2021

(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					
03 / 08 / 21	SH Fund, LLC 30 N. Gould St. Ste R Sheridan, WY., 89703	Web Services	IEI		\$9.00
01					
/ /					
02					
/ /					\$
03					
/ /					\$
04					
/ /					
05					
/ /					
/ /					