

Final Report W Knott

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY



(1) ROBERT WAYNE KNOTT
Name
(2) 100 GLEN CLUB COURT
Address (number and street)
DEBARY, FL 32713
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: MAYOR, CITY OF DEBARY
 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 01' 21' 17 To 01' 31' 17 Report Type: SP9
 Original Amendment Special Election Report

(6) Contributions This Report
Cash & Checks \$ _____, _____, 0.0
Loans \$ _____, _____, 0.0
Total Monetary \$ _____, _____, 0.0
In-Kind \$ _____, _____, _____

(7) Expenditures This Report
Monetary Expenditures \$ _____, 1,535.37
Transfers to Office Account \$ _____, _____, _____
Total Monetary \$ _____, 1,535.37

(8) Other Distributions
\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date
\$ _____, 5,369.01

(10) TOTAL Monetary Expenditures To Date
\$ _____, 5,369.01

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

X Robert W Knott
Signature

(Type name) ROBERT WAYNE KNOTT
 Candidate Chairperson (only for PC and PTY)

X Robert W Knott
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ROBERT WAYNE KNOTT

(2) I.D. Number _____

(3) Cover Period 01/21/17 through 01/31/17

(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
01/31/17	CITY OF DEBARY SIGN DEPOSIT	RETURN OF UNCASHED DEPOSIT CHECK			(100.00)
01					
01/31/17	ROBERT WAYNE KNOTT 100 GLEN CLUB COURT DEBARY, FL 32713	PAYMENT ON LOANS	RMB		1635.37
02					
1/1					
1/1					
1/1					
1/1					
1/1					

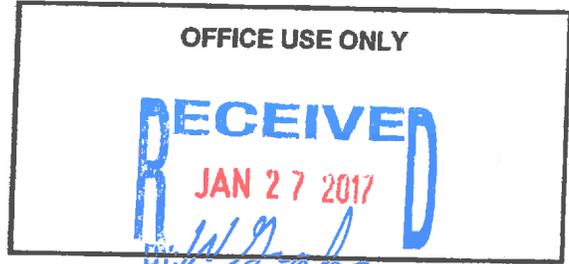
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ROBERT WAYNE KNOTT
Name

(2) 100 GLEN CLUB COURT
Address (number and street)

DEBARY, FL 32713
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: MAYOR, CITY OF DEBARY

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 01' 13' 17 To 01' 20' 17 Report Type: SP8

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 300.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, 300.00

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 5,369.01

(10) TOTAL Monetary Expenditures To Date

\$ _____, 3,833.69

(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) ROBERT WAYNE KNOTT

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

X Robert Wayne Knott
Signature

(Type name) ROBERT WAYNE KNOTT

Candidate Chairperson (only for PC and PTY)

X Robert Wayne Knott
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ROBERT WAYNE KNOTT (2) I.D. Number _____

(3) Cover Period 01/13/17 through 01/20/17 (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		Amount
01/20/17	SUSAN BANDEN 2730 ENTERPRISE RD ORANGE CITY, FL 32763	1	REALTOR	CHE			300.00
01							
1 1							
1 1							
1 1							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ROBERT WAYNE KNOTT
Name

(2) 100 GLEN CLUB COURT
Address (number and street)

DEBARY FL 32713
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: MAYOR, CITY OF DEBARY

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 12 / 31 / 2016 To 01 / 12 / 2017 Report Type: SP7

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 500.00

Loans \$ _____, 1,334.05

Total Monetary \$ _____, 1,834.05

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, 1,334.05

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, 1,334.05

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 5,069.01

(10) TOTAL Monetary Expenditures To Date

\$ _____, 3,833.64

(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) ROBERT WAYNE KNOTT

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

X Robert W Knott
Signature

(Type name) ROBERT WAYNE KNOTT

Candidate Chairperson (only for PC and PTY)

X Robert W Knott
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ROBERT WAYNE KNOTT (2) I.D. Number _____

(3) Cover Period 12 / 31 / 2016 through 01 / 12 / 2017 (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		Amount
01/04/17 01	WastePro 2101 W. SR 434 Ste 315 Longwood, FL 32779	B	Waste Mgmt	CHE			500.00
01/10/17 02	ROBERT WAYNE KNOTT 100 GLEN CLUB CT. DEBARY, FL 32713	S	RETIRED	LOA			940.00
01/11/17 03	ROBERT WAYNE KNOTT 100 GLEN CLUB COURT DEBARY, FL 32713	S	RETIRED	LOA			394.05
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name ROBERT WAYNE KNOTT

(2) I.D. Number _____

(3) Cover Period 12 / 31 / 16 through 01 / 12 / 17

(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
01/10/17 01	USPS DEBARY, FL	STAMPS FOR POST CARD MAILER	CAN		940.00
01/11/17	GRAPHIC SOURCE OF CENT. FL, LLC 637 S. CHARLES RICHARD BEAN, BLDG. DEBARY, FL 32713	POST CARDS FOR MAILER	CAN		394.05
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///					
///					
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CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ROBERT WAYNE KNOTT
Name

(2) 100 GLEN CLUB COURT
Address (number and street)

DEBARY, FL 32713
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: MAYOR, CITY OF DEBARY

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 12' 24' 16 To 12' 30' 16 Report Type: SP6

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 326.96

Total Monetary \$ _____, _____, 326.96

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 326.96

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 326.96

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 3,234.96

(10) TOTAL Monetary Expenditures To Date

\$ _____, 2,499.59

(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) ROBERT WAYNE KNOTT

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

X Robert Wayne Knott
Signature

(Type name) ROBERT WAYNE KNOTT

Candidate Chairperson (only for PC and PTY)

X Robert Wayne Knott
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ROBERT WAYNE KNOTT (2) I.D. Number _____

(3) Cover Period 12/24/16 through 12/30/16 (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
12/28/16	ROBERT WAYNE KNOTT 100 GLENCLW BCT. DE BARY, FL 32713	S	RETIRED	LOA			326.96
01							
/ /							
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/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ROBERT WAYNE KNOTT

(2) I.D. Number _____

(3) Cover Period 12 124 116 through 12 130 116

(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					
12/28/16 01	GRAPHIC SOURCE OF CENT. FL, LLC 637 S. CHARLES RICHARD BEALL BLVD DEBARY, FL 32713	CAMPAIGN YARD SIGNS	CAN		326.96
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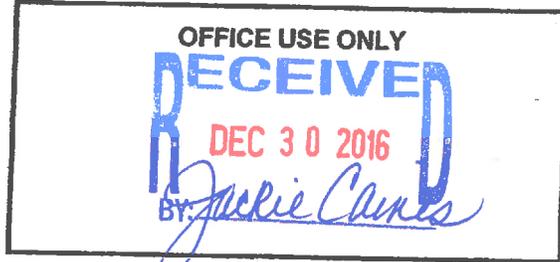
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ROBERT WAYNE KNOTT
Name

(2) 100 GLEN CLUB COURT
Address (number and street)

DEBARY FL 32713
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: MAYOR, CITY OF DEBARY
- 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 12' 17' 16 To 12' 23' 16 Report Type: SP5

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 967.10

Total Monetary \$ _____, _____, 967.10

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 967.10

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 967.10

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,908.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 2,172.61

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

X Robert W Knott
Signature

(Type name) ROBERT WAYNE KNOTT
 Candidate Chairperson (only for PC and PTY)

X Robert W Knott
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ROBERT WAYNE KNOTT (2) I.D. Number _____

(3) Cover Period 12/17/16 through 12/23/16 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
			Type	Occupation				
12/17/16	01	ROBERT WAYNE KNOTT 100 GLEN CLUB CT DEBARY, FL 32713	S	RETIRED	LOA			752.00
12/17/16	02	ROBERT WAYNE KNOTT 100 GLEN CLUB CT DEBARY, FL 32713	S	RETIRED	LOA			92.62
12/20/16	03	ROBERT WAYNE KNOTT 100 GLEN CLUB CT DEBARY, FL 32713	S	RETIRED	LOA			122.48
1 1								
1 1								
1 1								
1 1								

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ROBERT WAYNE KNOTT

(2) I.D. Number _____

(3) Cover Period 12/17/16 through 12/23/16

(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
12/17/16	USPS	STAMPS FOR VOTER MAILERS	CAN		752.00
01					
12/17/16	LOWE'S 901 SAXON BLVD. ORANGE CITY, FL	SIGN MAKING MATERIALS	CAN		92.62
02					
12/20/16	THE GRAPHIC SOURCE 63750 HWY 17/92, STE 3 DEBARY, FL 32713	PALM CARDS PRINTING	CAN		122.48
03					
11					
11					
11					
11					
11					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Wayne Knott
Name

(2) 100 Glen Club Court
Address (number and street)

DeBary, FL 32713
City, State, Zip Code

Check here if address has changed

(3) ID Number: W. Knott



(4) Check appropriate box(es):

Candidate Office Sought: Mayor, City of DeBary

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 12/10/2016 To 12/16/2016 Report Type: SP4

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 475.00

Loans \$ _____

Total Monetary \$ 475.

In-Kind \$ _____

(7) Expenditures This Report

Monetary Expenditures \$ 00

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 1,940.90

(10) TOTAL Monetary Expenditures To Date

\$ 1,205.51

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

X Robert W Knott
Signature

(Type name) Robert Wayne Knott
 Candidate Chairperson (only for PC and PTY)

X Robert W Knott
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Robert Wayne Knott (2) I.D. Number _____

(3) Cover Period 12/10/16 through 12/16/16 (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		Amount
12/15/16 01	JOHN BROOKS 685 COMANCHE ST ONIEDO, FL 32765	1					100.00
12/15/16 02	MICHAEL THOMAS 528 LAKE COVE POINT CIR. WINTER GARDEN FL 32787	1					700.00
12/15/16 03	JERCE CADENA 11345 PRESERVEVIEW DR WINDERMERE, FL 34786	1					100.00
12/15/16 04	CYNTHIA Mc ELWEE 1978 WESTBOURNE DR ONIEDO, FL 32765	1					50.00
12/10/16 05	MATTHEW K BOLTZ 497 N. PINE MEADOWS DR DEBARY, FL 32713	1					125.00
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Wayne Knott
Name

(2) 100 Glen Club Court
Address (number and street)
DeBary, FL 32713
City, State, Zip Code



(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Mayor, City of DeBary
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if address has changed
- 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 11' 26' 2016 To 12' 9' 2016 Report Type: SP3

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 100.00

Loans \$ 1,115.90

Total Monetary \$ 1,215.90

In-Kind \$

(7) Expenditures This Report

Monetary Expenditures \$ 1,042.41

Transfers to Office Account \$

Total Monetary \$

(8) Other Distributions

\$

(9) TOTAL Monetary Contributions To Date

\$ 1,465.90

(10) TOTAL Monetary Expenditures To Date

\$ 1,205.51

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

X Robert W Knott
Signature

(Type name) Robert Wayne Knott
 Candidate Chairperson (only for PC and PTY)

X Robert W Knott
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Robert Wayne Knott (2) I.D. Number _____

(3) Cover Period 11.13.16 through 12.09.16 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
11.13.16 01	MUMFORD, ERIC SPENCE, 341 GLENCLUB DR DEBARY, FL 32713	1		CHE			100.00
12.01.16 02	LOAN FROM Robert Knott (Candidate)	1		LOA			300.00
12.09.16	LOAN FROM Robert Knott (Candidate)	1		LOA			815.90
1 1							
1 1							
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Robert Wayne Knott

(2) I.D. Number _____

(3) Cover Period 11/26/16 through 12/09/16

(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
12/01/16 01	SUP. of Elections Vol. Co	VOTER MAIL LABELS	CAN		25.00
10/01/16 02	BIG LOTS FOUR TOWNS SHOP'CTR 2412 S. Vol. Ave Orange City, FL	Give-aways for campaign	CAN		21.30
12/02/16	The Graphic Source 637 So US Hwy 17/92 St. 3 DeBary, FL 32713	Campaign Business & Palm Cards	CAN		180.21
12/09/16	The Graphic Source 637 So. US Hwy 17/92 St 3 DeBary, FL 32713	Campaign Signs	CAN		815.90
11					
11					
11					
11					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ROBERT WAYNE KNOTT
Name

(2) 100 GLEN CLUB COURT
Address (number and street)

DEBARY, FL 32713
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____



(4) Check appropriate box(es):

Candidate Office Sought: MAYOR, CITY OF DEBARY

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 11' 12' 16 To 11' 25' 16 Report Type: SP2

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0 . _____

Loans \$ _____, _____, _____ . _____

Total Monetary \$ _____, _____, 0 . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0 . _____

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

Total Monetary \$ _____, _____, 0 . _____

(8) Other Distributions

\$ _____, _____, _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 250.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 163.10

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

X Robert W Knott
Signature

(Type name) Robert W Knott
 Candidate Chairperson (only for PC and PTY)

X Robert W Knott
Signature

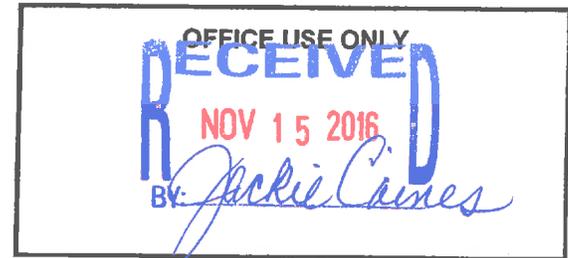
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert Wayne Knott
Name

(2) 100 Glen Club Court
Address (number and street)

DeBary, FL 32713
City, State, Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Mayor, City of DeBary

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 11 / 1 / 16 To 11 / 11 / 16 Report Type: SP1

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 250.00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 250.00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 163.10

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

Total Monetary \$ _____ , _____ , 163.10

(8) Other Distributions

\$ _____ , _____ , 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 250.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 163.10

(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) Robert W Knott

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

X Robert W Knott

Signature

(Type name) Robert W Knott

Candidate Chairperson (only for PC and PTY)

X Robert W Knott

Signature

CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name Robert Wayne Knott

(2) I.D. Number _____

(3) Cover Period 11/01/16 through 11/11/16

(4) Page _____ of _____

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
11/02/16	Wells Fargo Bank Orange City, FL	F	Personal Checking		250.00
1					
///					
///					
///					
///					
///					
///					
///					
///					
///					

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Robert Wayne Knott

(2) I.D. Number _____

(3) Cover Period 11/01/16 through 11/11/16

(4) Page _____ of _____

(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					
11/03/16	Volusia County, FL		CAN		3.10
1					
11/03/16	City of DeBary, FL		CAN		60.00
2					
11/05/16	City of DeBary, FL		CAN		100.00
3					
11					
11					
11					
11					