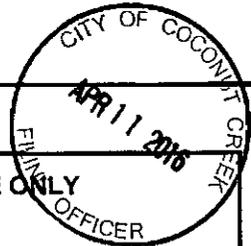


CAMPAIGN TREASURER'S REPORT SUMMARY



(1) Sandra L. Welch
Name

(2) 4372 NW 44th Terrace
Address (number and street)

Coconut Creek, FL 33073
City, State, Zip Code

OFFICE USE ONLY

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: City Commissioner, District C
- 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 3 / 1 / 16 To 3 / 31 / 16 Report Type M 2016-3

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , 1 , 500 . 00

Total Monetary \$ _____ , 1 , 500 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 27 . 95

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

Total Monetary \$ _____ , _____ , 27 . 95

(8) Other Distributions

\$ _____ , _____ , _____ . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 500 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 27 . 95

(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) Andrew W. Welch

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

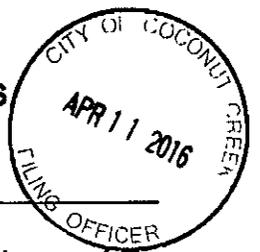
x Andrew W. Welch
Signature

(Type name) Sandra L. Welch

Candidate Chairperson (only for PC and PTY)

x Sandra L. Welch
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS



(1) Name Sandra L. Welch

(2) I.D. Number _____

(3) Cover Period 3 / 1 / 16 through 3 / 31 / 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	Amendment	Amount
<u>3 / 15 / 16</u>	<u>Welch, Sandra L.</u> <u>4372 NW 44th Terr</u> <u>Coconut Creek, FL</u> <u>33073</u>	<u>S</u>	<u>city</u> <u>Commissioner</u>	<u>LOA</u>			<u>1,500.00</u>
<u>1</u>							
<u>1 / 1</u>							
<u>1 / 1</u>							
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<u>1 / 1</u>							
<u>1 / 1</u>							



CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Sandra L. Welch

(2) I.D. Number _____

(3) Cover Period 3 / 1 / 16 through 3 / 31 / 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
3/23/16	Sun Trust Deluxe Financial Services 105 Rt. 46W Mountain Lakes, NJ 07046	Imprinted checks for Campaign Account	MON		27.95
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