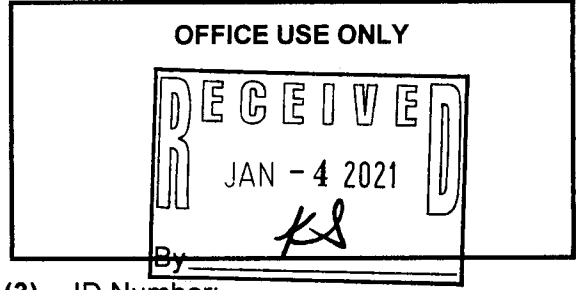


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CLIFFORD R. MERZ
Name

(2) 700 Chevy Chase Drive
Address (number and street)
Safety Harbor, Florida 34695
City, State Zip Code

Check here if address has changed



(3) ID Number: _____

(4) Check appropriate box(es):

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Candidate | Office Sought: <u>SAFETY Harbor City Commission SEAT 2</u> | <input type="checkbox"/> Check here if PC or ECO has disbanded |
| <input type="checkbox"/> Political Committee (PC) | | <input type="checkbox"/> Check here if PTY has disbanded |
| <input type="checkbox"/> Electioneering Communications Org. (ECO) | | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input type="checkbox"/> Party Executive Committee (PTY) | | |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | | |

(5) Report Identifiers

Cover Period: From 12 / 01 / 2020 To 12 / 31 / 2020 Report Type: M-12

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ — , — , 0 . 00

Loans \$ — , — , 100 . 00

Total Monetary \$ — , — , 0 . 00

In-Kind \$ — , — , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ — , — , 123 . 87

Transfers to Office Account \$ — , — , 0 . 00

Total Monetary \$ — , — , 123 . 87

(8) Other Distributions

\$ — , — , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ — , — , 200 . 00

(10) TOTAL Monetary Expenditures To Date

\$ — , — , 141 . 27

(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) CLIFFORD R. MERZ

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

X *Clifford R. Merz*
Signature

(Type name) CLIFFORD R. MERZ

Candidate Chairperson (only for PC and PTY)

X *Clifford R. Merz*
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name CLIFFORD R. MERZ (2) I.D. Number _____

(3) Cover Period 12 / 01 / 2020 through 12 / 31 / 2020 (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 / 01 / 2020	CLIFFORD R. MERZ 700 Chevy Chase Dr SAFETY Harbor, FL 34695	S	Engineer	LOA			100.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CLIFFORD R. MERZ

(2) I.D. Number _____

(3) Cover Period 12 / 01 / 2020 through 12 / 31 / 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					
12 / 01 / 2020	City of Safety Harbor 750 Main Street SAFETY Harbor, FL 34695		MON		123.87
///					
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///					
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