

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) WYNN PHILLIPS

Name

(2) 340 9TH ST N #107

Address (number and street)

NAPLES, FL, 34102

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: NAPLES CITY COUNCIL

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 5 / 01 / 2015 To 5 / 30 / 2015 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ NONE , ____ . ____

Loans \$ NONE , ____ . ____

Total Monetary \$ NONE , ____ . ____

In-Kind \$ NONE , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ NONE , ____ . ____

Transfers to Office Account \$ NONE , ____ . ____

Total Monetary \$ NONE , ____ . ____

(8) Other Distributions

\$ NONE , ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 1,600 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 108 . 33

(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) WYNN PHILLIPS

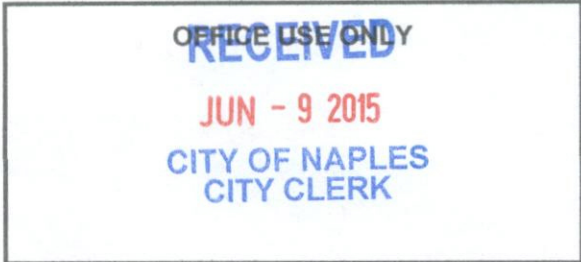
Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
Signature

(Type name) WYNN PHILLIPS

Candidate Chairperson (only for PC and PTY)

X _____
Signature



CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name WYNN PHILLIPS

(2) I.D. Number _____

(3) Cover Period 5 / 01 / 2015 through 5 / 30 / 2015

(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
/ NONE /	NONE				
NONE					
/ / /					
/ / /					
/ / /					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name WYNN PHILLIPS (2) I.D. Number _____

(3) Cover Period 5 / 01 / 2015 through 5 / 30 / 2015 (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		
NONE / /	NONE						
NONE							
/ /							
/ /							
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