

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Harvey Busch  
Name  
(2) 16445 Collins Ave # 2426  
Address (number and street)  
Sunny Isles Beach FL 33160  
City, State, Zip Code

OFFICE USE ONLY  
**RECEIVED**  
SEP 24 2012  
*Jan*

CHECK IF ADDRESS HAS CHANGED *omg! seriously?* (3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):  
 Candidate (office sought): Commissioner - City of Sunny Isles Beach Seat 3  
 Political Committee  CHECK IF PC HAS DISBANDED  
 Committee of Continuous Existence  CHECK IF CCE HAS DISBANDED  
 Party Executive Committee  
 Electioneering Communication  CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 1 / 1 / 12 To 3 / 31 / 12 Report Type 01  
 Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 5,080<sup>00</sup>  
 Loans \$ 200<sup>00</sup>  
 Total Monetary \$ 5,280<sup>00</sup>  
 In-Kind \$ \_\_\_\_\_

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 4412<sup>13</sup>  
 Transfers to Office Account \$ \_\_\_\_\_  
 Total Monetary \$ 4412<sup>13</sup>

(8) Other Distributions \$ \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date  
\$ 5280<sup>00</sup>

(10) TOTAL Monetary Expenditures To Date  
\$ 4412<sup>13</sup>

**(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 Mancos  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer  
X Robert Mancos  
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Harvey Busch  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)  
X Harvey Busch  
 Signature