

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Marie Huntley
Name

(2) 1237 NW 17th Street #204
Address (number and street)

Fort Lauderdale, FL 33311
City, State, Zip Code

Check here if address has changed

CITY OFFICE USE ONLY

2017 NOV 17 PM 12: 20

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City Commissioner District 3

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 / 01 / 17 To 11 / 10 / 17 Report Type: PI

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , 500.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , _____ . _____

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

Kenyatta York
Signature

(Type name) Marie Huntley
 Candidate Chairperson (only for PC and PTY)

Marie Huntley
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Marie Huntley (2) I.D. Number _____

(3) Cover Period 11 / 01 / 17 through 11 / 10 / 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		
11,08,17	Karen Cherry			INK	Catering		250.00
11,08,17	Kahlilah Thomas			INK	Sweets Table		250.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CITY CLERK

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Marie Huntley (2) I.D. Number _____

(3) Cover Period 11/01/17 through 11/10/17 (4) Page 1 of 1

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(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					
11/08/17	Khalilah Thomas		CAN		\$60.00
1					
11/08/17	Lorenzo Pierce		CAN		\$100.00
2					
11/8/17					
1/1					
1/1					
1/1					
1/1					