

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Chadwick Maxey for Ft. Lauderdale City Commission District 2

Name

(2) 1033 NE 17 Way Unit 803

Address (number and street)

Fort Lauderdale, FL 33304

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

CITY CLERK

2018 FEB -2 PM 3:39

(3) ID Number: 00000

(4) Check appropriate box(es):

Candidate Office Sought: FT. LAUDERDALE CITY COMMISSION

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 01 / 13 / 2018 To 01 / 26 / 2018 Report Type: TR

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0.00

Loans \$, , 0.00

Total Monetary \$, , 0.00

In-Kind \$, , 0.00

(7) Expenditures This Report

Monetary Expenditures \$, 4 , 337.67

Transfers to Office Account \$, ,

Total Monetary \$, 4 , 337.67

(8) Other Distributions

\$, , 0.00

(9) TOTAL Monetary Contributions To Date

\$, 36 , 792.00

(10) TOTAL Monetary Expenditures To Date

\$, 36 , 792.00

(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) MITCHELL BERGER

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

X 
Signature

(Type name) CHADWICK MAXEY

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Chad Maxey for Ft Lauderdale City Commission Dist 2

(2) I.D. Number 00000

(3) Cover Period 01 / 13 / 2018 through 01 / 26 / 2018

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Chad Maxey for Ft Lauderdale City Commission District 2

(2) I.D. Number 00000

(3) Cover Period 01 / 13 / 2018 through 01 / 26 / 2018

(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					
01 / 16 / 2018	Easton Harrison 1718 NW 56th Ave Lauderhill, FL 33313	Campaign election day worker	MON		\$150
1					
01 / 16 / 2018	Melissa Sullivan 640 NE 7th Ave Apt 3 Ft Lauderdale, FL 33304	Campaign election day worker	MON		\$150
2					
01 / 16 / 2018	Hustle 251 Kearny St #300 San Francisco, CA 94108	Peer-to-Peer text messaging service	MON		\$1380
3					
01 / 16 / 2018	Facebook 1 Hacker Way Menlo Park, CA 94025	Digital Advertising	MON		\$165.14
4					
01 / 16 / 2018	Brass Tap 551 N Federal Hwy #600 Ft Lauderdale, FL 33301	Campaign Event Catering	MON		\$280.18
5					
01 / 26 / 2018	Salver & Cook CPA 2721 Executive Park Dr Weston, FL 33331	Campaign Accounting Report	MON		\$750
6					
01 / 26 / 2018	Chad Maxey 1033 NE 17th Way unit 803 Ft Lauderdale, FL 33304	Loan Reimbursement	RMB		\$510
7					
01 / 26 / 2018	New Leaders Council 4005 Wisconsin Ave, NW, #39123 Washington, D.C., 20016	Donation to 501c3	MON		\$952.35
8					

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Chad Maxey for Ft Lauderdale City Commission District 2 (2) I.D. Number 00000

(3) Cover Period 01 / 13 / 2018 through 01 / 26 / 2018 (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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
(6) Sequence Number						
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CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name Chad Maxey for Ft Lauderdale City Commission District 2

(2) I.D. Number 00000

(3) Cover Period 01 / 13 / 2018 through 01 / 26 / 2018

(4) Page 1 of 1

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
(6) Sequence Number					
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