

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Dean Trantalis Campaign

Name

(2) 2929 East Commercial Blvd, Penthouse D

Address (number and street)


Fort Lauderdale, FL 33308

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY
CITY CLERK

MAY 11 2020



(3) BY: _____
ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City of Fort Lauderdale Mayor

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 4 / 1 / 20 To 4 / 30 / 20 Report Type: M4

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 100 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 100 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 4 . 30

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

Total Monetary \$ _____ , _____ , 4 . 30

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 149 , 809 . 50

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 23 , 244 . 72

(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) Timothy Hart

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

X _____
Signature

(Type name) Dean Trantalis

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Dean Trantalis Campaign

(2) I.D. Number _____

(3) Cover Period 4 / 1 / 20 through 4 / 30 / 20

(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					
4 / 30 / 20	Anedot 1920 McKinney Ave 7th Floor Dallas, TX 75201	merchant fee	MON		\$4.30
1					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Dean Trantalis Campaign (2) I.D. Number _____

(3) Cover Period 4 / 1 / 20 through 4 / 30 / 20 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
4 13 20 / / 1	Dickerman, Marc 1417 SW 2nd St, #2 Fort Lauderdale, FL 33312	I	retired	CAS			\$100.00
/ /							
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