

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Joanne Simone  
Name

(2) 7699 NW 21 ST  
Address (number and street)

Margate, FL 33063  
City, State, Zip Code



Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: Margate Commissioner Seat 5
- 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 1 / 1 / 2018 To 1 / 31 / 18 Report Type: 2018-M1

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

Loans \$ \_\_\_\_\_ , 1 , 000 . 00

Total Monetary \$ \_\_\_\_\_ , 1 , 000 . 00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , 200 . 00

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 1 . 00

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 1 . 00

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 1 , 000 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 1 . 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) Joanne Simone

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

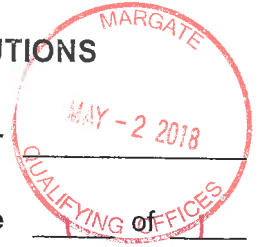
X Joanne Simone  
Signature

(Type name) Joanne Simone

Candidate  Chairperson (only for PC and PTY)

X Joanne Simone  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS



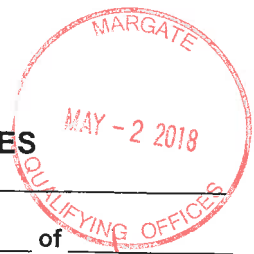
(1) Name Joanne Simone

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 1 / 1 / 18 through 1 / 31 / 18

(4) Page \_\_\_\_\_

(5) Date	(6) Sequence Number	(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
			Type	Occupation				
1 / 24 / 18	# 1	Simone, Joanne 7699 NW 21 ST Margate, FL 33063	S	candidate	LOA			1,000. <sup>00</sup>
1 / 24 / 18	# 2	Simone, Joanne 7699 NW 21 ST Margate, FL 33063	S	candidate	INK	Envelopes/ Printing		200. <sup>00</sup>
/ /								
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**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Joanne Simone

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 1 / 1 / 18 through 1 / 31 / 18

(4) Page 1 of \_\_\_\_\_

(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
1 / 24 / 18 #1	Brightstar Credit Union 3175 N. State Rd 7 Margate, FL 33063	Service fee	CAN		\$ 1.00
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