CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Cameron Mizell
Name

(2) 1219 NW 14 Court
Address (number and street)

Fort Laud., FL, 33311
City, State, Zip Code

☐ **Check here if address has changed**

OFFICE USE ONLY

CITY CLERK
2014 FEB 12 PM 3:09

(3) ID Number: _____

(4) Check appropriate box(es):

☑ Candidate Office Sought: 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 1 / 30 / 14 To 1 / 31 / 14 Report Type: _____

☑ Original ☐ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks	$ ___ , ___ , 100 . 00
Loans	$ ___ , ___ , ___ . ___
Total Monetary	$ ___ , ___ , ___ . ___
In-Kind	$ ___ , ___ , ___ . ___

(7) Expenditures This Report

Monetary Expenditures	$ ___ , ___ , 60 . 00
Transfers to Office Account	$ ___ , ___ , ___ . ___
Total Monetary	$ ___ , ___ , ___ . ___

(8) Other Distributions
$ ___ , ___ , ___ . ___

(9) TOTAL Monetary Contributions To Date
$ ___ , ___ , 100 . 00

(10) TOTAL Monetary Expenditures To Date
$ ___ , ___ , 60 . 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) MARC PYKANORD
☐ Individual (only for IE or electioneering comm.) ☐ Treasurer ☐ Deputy Treasurer

X
Signature

(Type name)
☐ Candidate ☐ Chairperson (only for PC and PTY)

X
Signature

SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Cameron Mizell **(2) I.D. Number** _____

(3) Cover Period 1 / 30 / 14 through 1 / 31 / 14 **(4) Page** 1 of 1

(5) Date / (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Contributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
1 / 30 / 14 ①	Cameron Mizell 1210 NW 14 Ct. Ft. Laud. Fl. 33311	I	L.F.D	CAS	N		100.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Cameron Mizell (2) I.D. Number

(3) Cover Period 1 / 30 / 14 through 1 / 31 / 14 (4) Page 1 of 1

(5) Date / (6) Sequence Number	(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
1/31/14	Cameron Mizell 1219 NW 14 Court Ft. Laud. Fl. 33311	Petty Cash	PCW		60.00
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