

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY OF FORT LAUDERDALE

(1) Sedrick Williams
Name

(2) 309 SW 14th St Apt B
Address (number and street)

Fort Lauderdale, FL, 33315
City, State, Zip Code

OFFICE USE ONLY
2022 DEC 12 PM 4:58
CITY CLERK'S OFFICE

Check here if address has changed

(3) 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 11 / 1 / 22 To 11 / 30 / 22 Report Type: M11

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 10 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 10 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 59 . 55

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

Total Monetary \$ _____ , _____ , 59 . 55

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 10 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 59 . 55

(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) Sedrick Williams

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

X Sedrick Williams
Signature

(Type name) Sedrick Williams

Candidate Chairperson (only for PC and PTY)

X Sedrick Williams
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Sedrick Williams (2) I.D. Number _____

(3) Cover Period 11 / 01 / 22 through 11 / 30 / 22 (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 / 17 / 22 1	Sedrick Williams 309 SW 14th Apts Fort Lauderdale, FL, 33315	I	Benama Republic- Fashion Stylist	CAS			810.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sedrick Williams

(2) I.D. Number _____

(3) Cover Period 11 / 01 / 22 through 11 / 30 / 22

(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
11 / 29 / 22	Sedrick Williams 3000 South St Vistaprint US	Campaign Merchandise	CAN EXP EXP		300.00 \$59.55
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