

# CAMPAIGN TREASURER'S REPORT SUMMARY

**OFFICE USE ONLY**  
 CITY OF FORT LAUDERDALE  
 2023 MAY 10 PM 12:59  
 CITY CLERK'S OFFICE

(1) Pedrick Williams  
 Name

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

Fort Lauderdale FL 33315  
 City, State, Zip Code

Check here if address has changed

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

(4) Check appropriate box(es):

- Candidate Office Sought: Mayor of Fort Lauderdale
- 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 / 23 To 4 / 30 / 23 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 \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

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

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ . \_\_\_\_\_

### (8) Other Distributions

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

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 00

### (10) TOTAL Monetary Expenditures To Date

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

### (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) Pedrick Williams

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

X Pedrick Williams  
 Signature

(Type name) Pedrick Williams

Candidate  Chairperson (only for PC and PTY)

X Pedrick Williams  
 Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Sedrick Williams (2) I.D. Number \_\_\_\_\_

(3) Cover Period 4 / 1 / 23 through 4 / 30 / 23 (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		Amount
4 / 10 / 23	Sedrick Williams 309 SW 14 <sup>th</sup> St Apt B Fort Lauderdale, FL 33315	I	Fashion Stylist	CAS			\$100.00
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