

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY
12 APR 10 AM 11:10

(1) ANTHONY SANDERS

Name

(2) 615 NW 4 CT.

Address (number and street)

HALLANDALE BEACH, FL 33009

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought):

COMMISSIONER

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 1 / 1 / 12 To 3 / 31 / 12 Report Type Q1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 100.00

Loans \$ —

Total Monetary \$ —

In-Kind \$ —

(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)

ANTHONY SANDERS

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Signature

Anthony Sanders

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

ANTHONY SANDERS

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

Signature

Anthony Sanders

