

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Gerald E. Dean
Name

(2) 726 NW 1st Ct.
Address (number and street)

Hallandale Bch., FL 33009
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: City Commissioner - Seat 1

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 06/21/2014 To 07/04/2014 Report Type: _____

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 300, ____, ____ . ____

Loans \$ ____, ____, ____ . ____

Total Monetary \$ ____, ____, ____ . ____

In-Kind \$ ____, ____, ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 273.79, ____, ____ . ____

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

Total Monetary \$ ____, ____, ____ . ____

(8) Other Distributions

\$ ____, ____, ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 300, ____, ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 273.79, ____, ____ . ____

(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) Gerald E. Dean

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

Gerald E. Dean
Signature

(Type name) Gerald E. Dean

Candidate Chairperson (only for PC and PTY)

Gerald E. Dean
Signature

OFFICE USE ONLY

14 JUL 16 PM 8:05
CITY OF HALLANDALE
CITY CLERK

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Gerald E. Dean (2) I.D. Number _____

(3) Cover Period 06/21/2014 through 07/04/2014 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9)	(10)	(11)	(12)
		Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
06/21/14	Dean, Gerald 726 NW 1st Ct. Hallandale Bch. FL 33009	I					\$300
/ /							
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CITY OF HALLANDALE
 CITY CLERK
 14 JUL 16 PM 3:05

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Gerald E. Dean

(2) I.D. Number _____

(3) Cover Period 06/21/2014 through 07/04/2014

(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
(6) Sequence Number					
06/24/14	City of Hallandale Beach.		Filing Fees		\$229.79
06/24/14	City of Hallandale Beach		Filing Fees		
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

17 JUL 2014
 3:05 PM
 CITY OF HALLANDALE
 CITY CLERK