

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ANTHONY A SANDERS
Name

(2) 615 NW 4 CT.
Address (number and street)

HALLANDALE BEACH FL. 33009
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

CITY OF HALLANDALE
CITY CLERK
14 JUN -5 PM 12:09

(4) Check appropriate box(es):
 Candidate Office Sought: COMMISSIONER, Hallandale Beach
 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 05 / 01 / 14 To 05 / 31 / 14 Report Type: MS

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 50.00

Loans \$ _____ , _____ , 00.00

Total Monetary \$ _____ , _____ , 50.00

In-Kind \$ _____ , _____ , 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 0.00

Transfers to Office Account \$ _____ , _____ , 0.00

Total Monetary \$ _____ , _____ , 0.00

(8) Other Distributions
\$ _____ , _____ , 0.00

(9) TOTAL Monetary Contributions To Date
\$ _____ , _____ , 271.90

(10) TOTAL Monetary Expenditures To Date
\$ _____ , _____ , 191.81

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

X _____
Signature

(Type name) ANTHONY SANDERS
 Candidate Chairperson (only for PC and PTY)

X Anthony Sanders
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ANTHONY A SAUNDERS (2) I.D. Number _____

(3) Cover Period 05 / 01 / 14 through 05 / 31 / 14 (4) Page _____ of _____

CITY OF HALLANDALE
 CITY CLERK
 14 JUN -5 PM 12:08

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
05, 19, 14	Coney Henderson 632 W Hallandale Hallandale Beach FL 33009	I	Retired B.S.O.	CHECK			50.00
/ /							
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/ /							
/ /							
/ /							
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/ /							