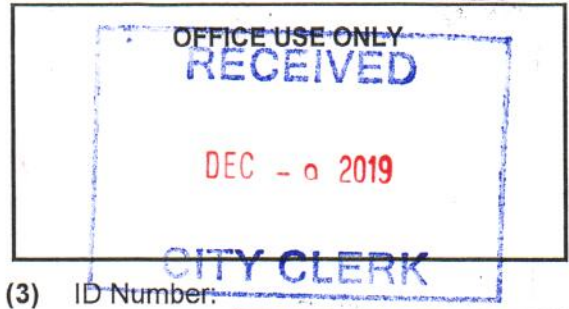


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sandra Davey
Name

(2) 4160 NW 45th Terr.
Address (number and street)
Lauderdale Lakes, FL 33319
City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commissioner, Seat 4
- 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 11/01/2019 To 11/30/2019 Report Type: M II

- Original
- Amendment
- Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 100.00

Loans \$ _____, _____, 0

Total Monetary \$ _____, _____, 100.00

In-Kind \$ _____, _____, 0

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0

Transfers to Office Account \$ _____, _____, 0

Total Monetary \$ _____, _____, 0

(8) Other Distributions

\$ _____, _____, 0

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 100.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0

(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) Sandra Davey

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

X Sandra Davey

Signature

(Type name) Sandra Davey

Candidate Chairperson (only for PC and PTY)

X Sandra Davey

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Sandra Davey (2) I.D. Number _____

(3) Cover Period 11/01/2019 through 11/30/2019 (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	Amendment	Amount
11,30,19	Sandra Davey 4160 NW 45 Ter Lauderdale Lakes FL 33319	S	Teacher Interim	Ces	None	None	\$100.00
1							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Sandra Davey (2) I.D. Number _____

(3) Cover Period 11/01/2019 through 11/30/2019 (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					
11	None				
11					
11					
11					
11					
11					