

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Karlene Maxwell-Williams

Name

(2) 5440 N. State Rd 7, Ste 202

Address (number and street)

Fort Lauderdale, FL 33319

City, State, Zip Code

Check here if address has changed



(3) ID Number: 0000

(4) Check appropriate box(es):

Candidate Office Sought: Lauderdale lakes 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 02 /01 /2020 To 02 /29 /2020 Report Type: M2

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 320. . 00

Loans \$, , 00 . 00

Total Monetary \$, , 00 . 00

In-Kind \$, , 00 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 21 . 00

Transfers to Office Account \$, , 00 . 00

Total Monetary \$, , 00 . 00

(8) Other Distributions

\$, , 00 . 00

(9) TOTAL Monetary Contributions To Date

\$, 2 , 375 . 60

(10) TOTAL Monetary Expenditures To Date

\$, , 21 . 00

(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) Karlene Maxwell-Williams

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

X *K Maxwell-Williams*

Signature

(Type name) Karlene Maxwell-Williams

Candidate Chairperson (only for PC and PTY)

X *K Maxwell-Williams*

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Karlene Maxwell-Williams (2) I.D. Number 0000
 (3) Cover Period 02 / 01 / 2020 through 02 / 29 / 2020 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(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
02 / 15 / 2020		ROSE MESSENGER-MANNISTO 4775 NW 113RD AVW SUNRISE, FL 33323	I		CHE			20.00
02 / 20 / 2020		ELITE REPORTING 707 SE 3RD AVE , SUITE 101 FORT LAUDERDALE, FL 33316	B		CHE			100.00
02 / 27 / 2020		BRIAN SCHAFERE 12291 NW 20TH COURT PLANTATION, FL 33323	I		CHE			50.00
02 / 28 / 2020		CRISTAL COTMON 3299 NW 42ND STREET LAUDERDALE LAKES, FL 33309	I		CHE			50.00
02 / 28 / 2020		NORMAINE LEGISTER 121-44 BENTON STREET SPRINGFIELD GARDEN, FL 11415	I		CAS			100.00
/ /								
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Karlene Maxwell-Williams

(2) I.D. Number 0000

(3) Cover Period 02 / 01 / 2020 through 02 / 29 / 2021

(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					
02 / 10 / 2020	CHINAMAN PRINT 3676 W. OAKLAND PARK BLVD LAUDERDALE LAKES, FL 33311	BUSINESS CARD FLYER	CAN		21.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Karlene Maxwell-Williams (2) I.D. Number 0000

(3) Cover Period 02 / 01 / 2021 through 02 / 29 / 2021 (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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
/ /	NOTHING TO REPORT ON THIS FORM					
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