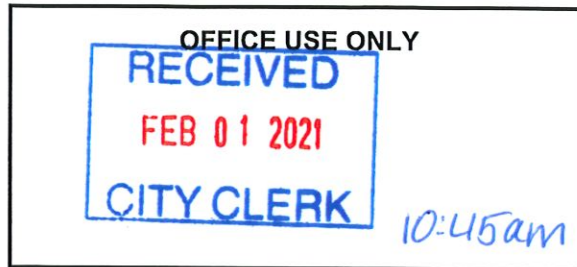


## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Karlene Maxwell-Williams  
 Name  
 (2) 5440 N. State Road, Ste 202  
 Address (number and street)  
Fort Lauderdale, FL 33319  
 City, State, Zip Code



(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate Office Sought: Lauderdale Lakes Commisisoner Seat 4

Political Committee (PC)

Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded

Party Executive Committee (PTY)  Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 10 / 30 / 2020 To 02 / 01 / 2021 Report Type: TR

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 2,966 . 00

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 2,966 . 00

**(8) Other Distributions**

\$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , 10,009 . 80

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , 10,009 . 80

### (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 \_\_\_\_\_

(3) Cover Period 10 / 30 / 2020 through 02 / 01 / 2021 (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
/ /	Nothing to report on this form						
/ /							
/ /							
/ /							
/ /							
/ /							

### CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Karlene Maxwell-Williams

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 10 / 30 / 2020 through 02 / 01 / 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					
11 / 02 / 2020	Unique INK Printing 934 SW 89th Ave Boca Raton, FL 33486	T-Shirts and Flyers	CAN		\$467.00
11 / 03 / 2020	Calvin Kerr 2999 NW 48th Ave Lauderhill, FL 33313	Poll Workers	CAN		\$2500.00