

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jean S. Dieudonne
Name

(2) 155 San Remo Blvd
Address (number and street)

North Lauderdale, FL 33068
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: North Lauderdale Commissioner Seat A
- 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

OFFICE USE ONLY

RECEIVED

OCT 09 2018

CITY NORTH LAUDERDALE

(5) Report Identifiers

Cover Period: From 09 / 01 / 18 To 10 / 05 / 18 Report Type: 2018-G4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 144.00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 144.00

In-Kind \$ _____ , _____ , 541.50

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 133.96

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 133.96

(8) Other Distributions

\$ _____ , _____ , _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 464.90

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 610.64

(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) Shela Saint Juste

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

X [Signature]
Signature

(Type name) Jean S. Dieudonne

Candidate Chairperson (only for PC and PTY)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Jean S. Dieudonne (2) I.D. Number _____

(3) Cover Period 09 / 01 / 18 through 10 / 05 / 18 (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		Amount
09 / 28 / 18	24 hour Printing Inc 6041 Kimberly Blvd Unit C North Lauderdale	I	Funeral Coordinator	INK	Signs		\$ 221.50
10 / 02 / 18	Berenise Francois 895 S.W. 51 Ave Margate FL 33068	I	Retired	CAS			\$ 126. ⁰⁰
10 / 02 / 18	Bradley Petibos 3861 N.W. 78th Place Apt 429 Tamarac FL 33321	I	Paramedic	CAS			\$ 18. ⁰⁰
10 / 03 / 18	24 hour Printing Inc 6041 Kimberly Blvd Unit C North Lauderdale FL	I	Funeral Coordinator	INK	Signs		\$ 320. ⁰⁰
1 / 1							
1 / 1							
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Jean S. Dieudonne

(2) I.D. Number _____

(3) Cover Period 09/01/18 through 10/05/18

(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					
09/20/18	Place 4 Print Custom T-shirts & Embroidery 1333 S. State Road 7 North Lauderdale FL 33068	Printing	CAN		\$84.80
1					
09/20/18	Home Depot 1195 South State Road 7 North Lauderdale FL 33068	Signs	CAN		\$30.59
2					
09/20/18	Wells Fargo N. Lauderdale, FL 33068	Bank Fees			\$2.00
3					
9/28/18	Wells Fargo	Bank Fees			\$14.00
4					
10/01/18	The Home Depot 1195 South State Road 7 North Lauderdale FL 33068	Signs	CAN		\$56.67
5					
10/02/18	Wells Fargo North Lauderdale FL	Bank Fees			\$2.00
6					
11					
11					

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Jean S. Dieudonne (2) I.D. Number _____

(3) Cover Period 09/01/18 through 10/05/18 (4) Page _____ of _____

(5) Date (6) Sequence Number	(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
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