

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) diane gonzalez simpson

Name

(2) po box 8061

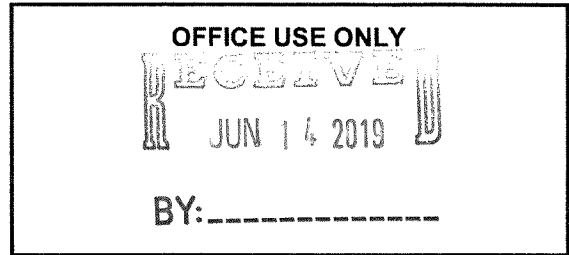
Address (number and street)

coral springs, fl. 33065

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____



(4) Check appropriate box(es):

Candidate Office Sought: city commission seat 2

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 / 18 / 19 To 05 / 31 / 19 Report Type: 2019 63

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 50 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 50 . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 633 . 45

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 633 . 45

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 41 , 710 . 57

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 11 , 556 . 55

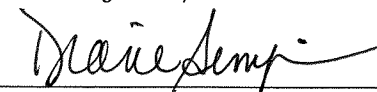
(11) Certification

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) DIANE SIMPSON

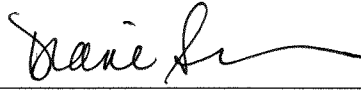
Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 

Signature

(Type name) DIANE SIMPSON

Candidate Chairperson (only for PC and PTY)

X 

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name DIANE GONZALEZ SIMPSON

(2) I.D. Number _____

(3) Cover Period 5, 18, 2019 through 5, 31, 2019

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9)	(10)	(11)	(12)
		Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
5, 28, 2019	Ryan Petty						50-
1				CHE			
/ / 2019							
				CHE			
/ / 2019							
				CHE			
/ / 2019							
				CHE			
/ / 2019							
				CHE			
/ / 2019							
				CHE			
/ / 2019							
				CHE			

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name diane gonzalez simpson

(2) I.D. Number _____

(3) Cover Period 5, 18, 19 through 5, 31, 19

(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					
5/20/19	Facebook.com 1601 Willow Rd Menlo Park CA 94025	Voter Communication (ADV)	mon		235.47
1					
5/20/19	USPS.COM 8300NE Underground Dr Pillar 210 Kansas City MO 64144	Postage	mon		165.00
2					
5/20/19	Elisha Ramirez 7901 NW 82 Terr Parkland Fl. 33067	Voter COMM	mon		100.00
3					
5/21/19	Highway Traffic Supply 40 W Washington Ave Pearl River NY 10965	Voter COMM	mon		85.68
4					
5/28/19	anedit.com 10821 Rosebud Ct Baton Rouge LA 70815	Bank fee	mon		2.30
5					
5/29/19	mail chimp 675 Ponce DeLeon Ave 5060 Atlanta GA 30308	Voter COMM	mon		45.00
6					
11			mon		
11					