

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Joy Lynn Carter

Name

(2) 485 NW 107th Ter

Address (number and street)

Coral Springs, FL 33071

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

01-08-16 P02:09 IN

(3) ID Number: _____

(4) Check appropriate box(es):

- | | |
|---|--|
| <input checked="" type="checkbox"/> Candidate Office Sought: <u>Coral Springs City Commissioner Seat 5</u>
<input type="checkbox"/> Political Committee (PC)
<input type="checkbox"/> Electioneering Communications Org. (ECO)
<input type="checkbox"/> Party Executive Committee (PTY)
<input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | <input type="checkbox"/> Check here if PC or ECO has disbanded
<input type="checkbox"/> Check here if PTY has disbanded
<input type="checkbox"/> Check here if no other IE or EC reports will be filed |
|---|--|

(5) Report Identifiers

Cover Period: From 12 / 1 / 2015 To 12 / 31 / 2015 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , , .

Loans \$ 0 , , .

Total Monetary \$ 0 , , .

In-Kind \$ 0 , , .

(7) Expenditures This Report

Monetary Expenditures \$, , 72 . 15

Transfers to Office Account \$, , .

Total Monetary \$, , .

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, , 2,25000

(10) TOTAL Monetary Expenditures To Date

\$, , 72 . 15

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

Carol Wechsler
 Signature

(Type name) Joy Carter
 Candidate Chairperson (only for PC and PTY)

Joy Carter
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Joy Lynn Carter

(2) I.D. Number _____

(3) Cover Period 12 / 1 / 2015 through 12 / 31 / 2015

(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					
12 / 17 / 15	PNC Bank Univesrity Dr Coral Springs, FL 33065	Business Checks	CAN		\$72.15
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