

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Susan Starkey
Name

(2) 2269 South University Drive, #109
Address (number and street)

Davie, Florida 33325

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):

Candidate (office sought): _____

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(3) ID Number: _____

OFFICE USE ONLY
RECEIVED
JUL 10 2012 *W*
TOWN OF DAVIE
Town Clerk's Office

(5) REPORT IDENTIFIERS

Cover Period: From 04/01/2012 To 06/30/2012 Report Type Q2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ \$1,380.47

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 233.53

Transfers to Office Account \$ _____

Total Monetary \$ 233.53

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date
\$ \$1,380.47

(10) TOTAL Monetary Expenditures To Date
\$ 233.53

(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) Susan Starkey

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Susan Starkey
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Susan Starkey

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Susan Starkey
Signature

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY

07-09-12 P03:36 RCVD *W*

RECEIVED

JUL - 9 2012

(1) Susan Starkey
Name

(2) 2269 S. University Drive #109
Address (number and street)

Davie, FL 33325
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: TOWN OF DAVIE
Town Clerk's Office

(4) Check appropriate box(es):

Candidate (office sought): _____

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 04 / 01 / 2012 To 06 / 30 / 2012 Report Type Q2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1,146.94

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 233.53

Transfers to Office Account \$ _____

Total Monetary \$ 233.53

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,146.94

(10) TOTAL Monetary Expenditures To Date

\$ 233.53

(11) CERTIFICATION

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(Type name) Susan Starkey
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Susan Starkey
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Susan Starkey
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Susan Starkey
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

JUL - 9 2012



(1) Name Susan Starkey

(2) I.D. Number TOWN OF DAVIE
Town Clerk's Office

(3) Cover Period 04 / 01 / 2012 through 06 / 30 / 2012

(4) Page 2 of 3

(5) Date	(6) Sequence Number	(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
04 / 23 / 2012	01	Wells Fargo Office Account 3575 S.University Drive Davie, FL 33325	B	Business	Transfer			1380.47
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JUL - 9 2012 *ML*

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Susan Starkey

(2) I.D. Number TOWN OF DAVIE
Town Clerk's Office

(3) Cover Period 04 / 01 / 2012 through 06 / 30 / 2012

(4) Page 3 of 3

(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					
04 / 24 / 12	My Mailbox 2269 S. University Drive Davie, Florida 33325	Receive Mail	MON		\$183.00
01					
05 / 01 / 12	Harland Clarke Checks Wells Fargo	printing checks	MON		\$50.53
02					
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// /					
// /					
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