

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

OFFICE USE ONLY

RCVD JAN 8 '13 *121*

(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: _____

(4) Check appropriate box(es):

Candidate (office sought): Davie Town Council District 3

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 01 / 2012 To 12 / 31 / 2012 Report Type Q4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 4,670.00

Loans \$ 0.00

Total Monetary \$ 4,670.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 10.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 10.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 6,075.47

(10) TOTAL Monetary Expenditures To Date

\$ 303.53

(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.

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

(Type name) Susan Starkey

(Type name) Susan Starkey

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

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

X Susan Starkey
Signature

X Susan Starkey
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Susan Starkey

(2) I.D. Number RCVD JAN 8 '13 

(3) Cover Period 10 / 01 / 2012 through 12 / 31 / 2012 (4) Page 1 of 2

(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				
10 / 23 / 2012	Bryan Caletka 3860 SW 60th Ave Davie, FL 33314	I	Teacher/ Council- member	check			\$100.00
01							
10 / 29 / 2012	Mohegan Lake, LLC P.O. Box 8960 Rancho Santa Fe, CA 92067	B	Real Estate	check			\$500.00
02							
10 / 29 / 2012	Rexmere/Paradise Trash Haulers, Inc P. O. Box 8960 Rancho Santa Fe, CA 92607	B	trash hauling company	check			\$500.00
03							
10 / 29 / 2012	Senior Mr. Planet, LLC P. O. Box 8960 Rancho Santa Fe, CA 92067	B	event coordin- -ating	Check			\$500.00
04							
10 / 29 / 2012	Sheepshead Bay LLC P. O. Box 8960 Rancho Santa Fe, CA 92067-8920	B	real estate	Check			\$500.00
05							
10 / 29 / 2012	Devora LLC P. O. Box 8960 Rancho Santa Fe, CA 92067	B	real estate	Check			\$500.00
06							
10 / 29 / 2012	Grasmere Lake, LLC P. O. Box 8960 Rancho Santa Fe, CA 92067	B	real estate	Check			\$500.00
07							
10 / 29 / 2012	Rexmere Village 11300 Rexmere Blvd Davie, FL 33325	B	mobile home communi- ty	check			\$500.00
08							



CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

RCVD JAN 8 '13



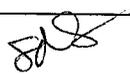
(1) Name Susan Starkey

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 2012 through 12 / 31 / 2012

(4) Page 2 of 2

(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							
10 / 29 / 2012	Paradise Village 12850 West State Road 84 Davie, FL 33325	B	mobile home communi- ty	check			\$500.00
09							
10 / 29 / 2012	James M. Dale P. O. Box 8960 Rancho Santa Fe, CA 92067	I	Busines -sman	Check			\$500.00
10							
11 / 26 / 2012	Kathy Shafer 9481 Evergreen Place #301 Davie, FL 33324	I		cash			\$10.00
11							
11 / 26 / 2012	Wells Fargo Bank P. O. Box 6995 Portland, OR 97228	B	Banking	REF			\$60.00
12							
/ /							
/ /							
/ /							
/ /							
/ /							



CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Susan Starkey

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 2012 through 12 / 31 / 2012

(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
11 / 30 / 12	Wells Fargo P. O. Box 6995 Portland, OR 97288	bank service charge	MON		\$5.00
01					
12 / 31 / 12	Wells Fargo P. O. Box 6995 Portland, OR 97228	bank service charge	MON		\$5.00
02					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

