

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

OFFICE USE ONLY

(1) James J. Moore
Name


(2) 5602 SW 57th Place
Address (number and street)

Davie, FL 33314

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

02-06-15P01:15 RCVD 

(4) Check appropriate box(es):

Candidate (office sought): Town Councilmember, District 1

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 01 / 01 / 2015 To 01 / 31 / 2015 Report Type 2015 M1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 200.00

Loans \$ 660.00

Total Monetary \$ 860.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 864.80

Transfers to Office Account \$ 0.00

Total Monetary \$ 864.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,360.00

(10) TOTAL Monetary Expenditures To Date

\$ 864.80

(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) James J. Moore

(Type name) James J. Moore

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

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

X 
Signature

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name James (Jim) Moore (2) I.D. Number _____

(3) Cover Period 01 / 01 / 2015 through 01 / 31 / 2015 (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							
01 / 06 / 2015	Moore, James, J 5602 SW 57th Place Davie, FL 33314	I	Insurance sales	LOA			400.00
1							
01 / 07 / 2015	Moore, James J 5602 SW 57th Place Davie, FL 33314	I	Insurance sales	LOA			260.00
2							
01 / 21 / 2015	Raquel Suarez 5701 SW 58th Ct Davie, FL 33314	I	Office Manager	CHE			100.00
3							
01 / 21 / 2015	Andrea & Edward Rappold 14942 SW 36th St Davie, FL 33331	I	Teacher	CHE			100.00
4							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name James (Jim) Moore

(2) I.D. Number _____

(3) Cover Period 01 / 01 / 2015 through 01 / 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					
01 / 06 / 15	Town of Davie 6591 Orange Drive Davie, FL 33314	Filing Fee	MON		\$564.80
1					
01 / 12 / 15	Town of Davie 6591 Orange Drive Davie, FL 33314	Sign Bond	MON		\$300.00
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					