

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Susan Starkey
 Name
 (2) 2622 East Orchard Circle
 Address (number and street)
Davie, FL 33328
 City, State, Zip Code

OFFICE USE ONLY

02-05-18 P03:13 IN

gs

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Davie Town Council, District 3
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 1 /01 /2018 To 1 /31 /2018 Report Type: _____

- Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , 2,000 . 00

Total Monetary \$ _____ , _____ , -0- . 00

In-Kind \$ -0- , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 68 . 86 \$

Transfers to Office Account \$ -0- , _____ , _____ . _____

Total Monetary \$ -0- , _____ , _____ . _____

(8) Other Distributions

\$ -0- , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2,000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , \$68.86

(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 IE or electioneering comm.) Treasurer Deputy Treasurer

(Type name) Susan Starkey
 Candidate Chairperson (only for PC and PTY)

Susan Starkey
 X _____
 Signature

Susan Starkey
 X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Susan Starkey (2) I.D. Number _____

(3) Cover Period 01 / 01 / 2018 through _____ / _____ / _____ (4) Page 1 of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
01 / 09 / 2018	Susan Starkey 2622 East Orchard Cir Davie, FL 33328		Elected offi	LOAN			\$2,000.00
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/ /							
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CAMPAIGN LOANS REPORT

(Section 106.075, F.S.)

(PLEASE TYPE)

OFFICE USE ONLY

01-11-18P04:06 RCVD



This report applies to all candidates ELECTED to office who had loans exceeding \$500 in value, which were accepted and used for campaign purposes within the 12 months preceding the election. All such loans must be reported to the filing officer within 10 days after the candidate's election to office.

Susan Starkey

Full Name of Newly Elected Official

Davie Town Council

Office

6591 Orange Drive

Mailing Address

Davie

FL

33328

City

State

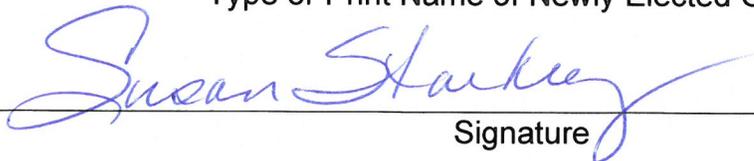
Zip Code

I CERTIFY THAT I HAVE EXAMINED THIS REPORT
AND IT IS TRUE, CORRECT AND COMPLETE.

Susan Starkey

Type or Print Name of Newly Elected Official

X



Signature

CAMPAIGN LOANS REPORT ITEMIZED

(PLEASE TYPE)

<p>FULL NAME AND ADDRESS OF LENDER: <u>Susan Starkey</u> <u>2622 East Orchard Circle</u> <u>Davie, FL 33328</u></p> <p>OCCUPATION: <u>Elected/Candidate</u></p> <p>AMOUNT OF LOAN: <u>\$2,000.00</u></p> <p>DATE RECEIVED: <u>1/9/2018</u></p>	<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p>
<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p>	<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p>
<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p>	<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____</p> <p>OCCUPATION: _____</p> <p>AMOUNT OF LOAN: _____</p> <p>DATE RECEIVED: _____</p>