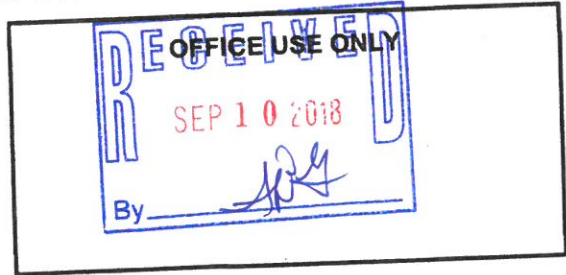


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Brandon Smith
Name

(2) 4811 SW 19th Street
Address (number and street)

West Park, FL 33023
City, State, Zip Code



(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

Candidate Office Sought: Commissioner

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 08 / 01 / 18 To 08 / 30 / 18 Report Type: M8

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 200.00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , _____ . _____

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

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions
\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date
\$ _____ , _____ , 200.00

(10) TOTAL Monetary Expenditures To Date
\$ _____ , _____ , _____ . _____

(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) Monetta Whitehead

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

Monetta Whitehead
Signature

(Type name) Brandon Smith

Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Brandon Smith

(2) I.D. Number _____

(3) Cover Period 08 / 01 / 18 through 08 / 30 / 18

(4) Page 1 of 1

(5) Date	(6) Sequence Number	(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
			Type	Occupation				
08 / 25 / 18	47	Rudical Mike 7357 Davie Rd Davie, FL 33024	I	Restaurant owner	CK			200.00
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								
/ /								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES