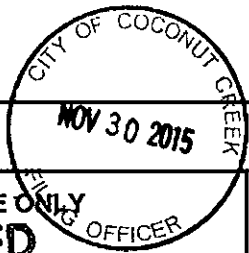


CAMPAIGN TREASURER'S REPORT SUMMARY



(1) Mikkie Belvedere
 Name
 (2) 3502 Bimini Lane, N-1
 Address (number and street)
Coconut Creek, FL 33066
 City, State, Zip Code

OFFICE USE ONLY
RECEIVED
 NOV 30 2015
 CITY OF COCONUT CREEK
 CITY CLERK

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate Office Sought: Coconut Creek Commission - District B

☐ 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 11/01/15 To 11/30/15 Report Type: M11

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 7 . ✓

Loans \$ _____, _____, _____ . _____

Total Monetary \$ _____, _____, _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 49 . 80

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

Total Monetary \$ _____, _____, 49 . 80

(8) Other Distributions

\$ _____, _____, _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 4095 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 386 . 28

(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) Linda G. Schwesow

☐ Individual (only for IE or electioneering comm.)

☒ Treasurer

☐ Deputy Treasurer

X Linda G. Schwesow
 Signature

(Type name) Mikkie Belvedere

☒ Candidate

☐ Chairperson (only for PC and PTY)

X Mikkie Belvedere
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Mikkie Belevedere

(2) I.D. Number _____

(3) Cover Period 11/01/15 through 11/30/15

(4) Page 2 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
/ /	<i>NONE</i>						
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Mikkie Belvedere

(2) I.D. Number _____

(3) Cover Period 11 / 1 / 15 through 11 / 30 / 15

(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
11/13/15	OFFICE DEPOT 5500 W. SAMPLE RD MARGATE, FL 33063	INK FOR COPY MACHINE AND ENVELOPES	ch		49.80
1					
11/13/15					
11					
11					
11					
11					
11					
11					