	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Mikkie Bolievere	OFFICE USE ONLY RECEIVED						
(2)	3502 MIMINI Lawe N-1 Address (number and street)	MAY 0 7 2015						
	City, State, Zip Code	CITY OF COCONUT CREEK #						
	Check here if address has changed	(3) ID Number:						
(4)	(4) Check appropriate box(es):  Candidate Office Sought:  Political Committee (PC)  Electioneering Communications Org. (ECO)  Party Executive Committee (PTY)  Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if PTY has disbanded  Check here if no other IE or EC reports will to							
(5) Report Identifiers								
. /	<u> </u>	cial Election Report Report Type:						
(6)	Contributions This Report	(7) Expenditures This Report						
	h & Checks \$,,	Monetary Expenditures \$,						
Loa	ns \$,, <u>301</u> . <u>01</u>	Transfers to Office Account \$ , , .						
Tota	ai Monetary \$ , ,	Total Monetary \$,						
In-K	ind \$,,							
		\$,						
(9)	TOTAL Monetary Contributions To Date \$	(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:								
Land Control of the C								
	Type name) Individual (only for IE Treasurer Deputy Treasurer relection eering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
×	Luda Dach weson	X Mishie Tachiastera						
	DE 12 (Rev. 11/13)	SEE REVERSE FOR INSTRUCTIONS						

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Mikkle BENEDERE				(2) I.D. Number							
(3) Cover Period 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)				
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Туре		Contribution Type	In-kind Description	Amendment	Amount				
4 124 115	Mikkie Pelverich 3502 Biminidane W-1 Crossuf Cuch Pr 33666	ASS	I	hoA			300.				
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name <u>MILKIE (25/20) SIG</u> (2) I.D. Number									
(3) Cover Period	<u> 4                                    </u>	130115 (4	4) Page	<i></i> of _	/				
(5) Date (6) Sequence Number	(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)				
/ /	ME								
/ /	N V								
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