

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JOHN GEORGE BECKFORD
 Name
 (2) 3414 HEATHER TERRACE
 Address (number and street)
LAUDERHILL FL 33319
 City, State, Zip Code

OFFICE USE ONLY
RECEIVED
 JUL 06 2017
 CITY CLERK'S OFFICE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: LAUDERHILL CITY COMMISSIONER, SEAT 2
- 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 06 / 01 / 17 To 06 / 30 / 17 Report Type: M6 2017

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 355.00

Loans \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 355.00

In-Kind \$ _____ , _____ , _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 1.00

Transfers to Office Account \$ _____ , _____ , _____

Total Monetary \$ _____ , _____ , 1.00

(8) Other Distributions

\$ _____ , _____ , 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____ , \$1,055.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 201.45

(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) JOHN GEORGE BECKFORD

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

X _____
 Signature

(Type name) JOHN GEORGE BECKFORD

Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JOHN GEORGE BECKFORD (2) I.D. Number _____

(3) Cover Period 06 / 01 / 17 through 06 / 30 / 17 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
06/05/17	BOYAR, MIKE 9657 ISLES CAY DELRAY BCH FL 33446	B	OFFICE MANAGER	CHE			\$250.00
1							
06/05/17	BLAKE, GUIDA 4210 NW 49 TH LAKES FL 33319	B	RETIRED	CSH			\$5.00
2							
06/09/17	CASBARRO, JOHN 5532 SW 114 AVE COOPER CITY FL 33330	B	BUSINESS OWNER	CHE			\$100.00
3							
/ /	—		—	—	—		—
/ /	—		—	—	—		—
/ /	—		—	—	—		—
/ /	—		—	—	—		—

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JOHN GORDGE BECKFORD

(2) I.D. Number _____

(3) Cover Period 06/01/17 through 06/30/17

(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					
06/23/17	TD BANK 1701 ROUTE 70 EAST CHERRY HILL NJ 08034	STATEMENT FEE	-	-	\$1.00
1					
/ /	N/A				
/ /	N/A				
/ /	N/A				
/ /	N/A				
/ /	N/A				
/ /	N/A				
/ /	N/A				