CAMPAIGN TREASURER'S REPORT SUMMARY
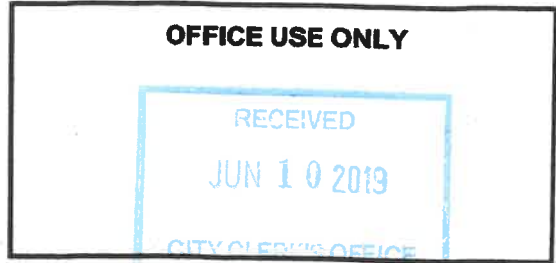
(1) **JOHN G. BECKFORD**
Name

(2) **3414 HEATHER TERRACE**
Address (number and street)

LAUDERHILL FL 33319
City, State, Zip Code

☐ **Check here if address has changed**

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate   Office Sought: **LAUDERHILL CITY COMMISSION, SEAT 1**
☐ 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   ☐ **Check here if no other IE or EC reports will be filed**
individual making electioneering communications)

(5) Report Identifiers

Cover Period: From **05 / 01 / 2019** To **05 / 31 / 2019** Report Type: **M5**

☐ Original   ☐ Amendment   ☐ Special Election Report

(6) Contributions This Report		(7) Expenditures This Report	
Cash & Checks	$ __,__,__ . ∅	Monetary Expenditures	$ __,__,1 . 00
Loans	$ __,__,__ . ∅	Transfers to Office Account	$ __,__,__ . ∅
Total Monetary	$ __,__,__ . ∅	Total Monetary	$ __,__,1 . 00
In-Kind	$ __,__,__ . ∅		

(8) Other Distributions
$ __,__,__ . __

(9) TOTAL Monetary Contributions To Date
$ __,__,114 . 28

(10) TOTAL Monetary Expenditures To Date
$ __,__,3 . 00

(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 BECKFORD**
☐ Individual (only for IE or electioneering comm.)   ☒ Treasurer   ☐ Deputy Treasurer

X _____
Signature

(Type name) **JOHN G. BECKFORD**
☒ Candidate   ☐ Chairperson (only for PC and PTY)

X _____
Signature

DS-DE 12 (Rev. 11/13)   SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

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

(3) Cover Period 05 / 01 / 19 through 05 / 31 / 19   (4) Page ____1____ of ____1____

(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) Amount
05/05/19	TD BANK 1701 ROUTE 70 EAST CHERRY HILL NJ 08034	STATEMENT FEE	CAN		$1.00
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

DS-DE 14 (Rev. 11/13)   SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES