| FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| (1) Audrey M. Edmonson | OFFICE USE ONLY | | | | | | | |
| Name | ONLINE SUBMISSION | | | | | | | |
| (2) 295 NE 88 Street Address (number and street) | | | | | | | | |
| El Portal, FL 33138 | | | | | | | | |
| City, State, Zip Code | | | | | | | | |
| CHECK IF ADDRESS HAS CHANGED | (3) ID Number: 571 | | | | | | | |
| (4) Check appropriate box(es): | | | | | | | | |
| ☐ Candidate (office sought): County Commiss | | | | | | | | |
| ☐ Political Committee ☐ ☐ Committee of Continuous Existence ☐ | CHECK IF PC HAS DISBANDED CHECK IF CCE HAS DISBANDED | | | | | | | |
| ☐ Party Executive Committee | _ CHECK IF CCE HAS DISBANDED | | | | | | | |
| ☐ Electioneering Communication ☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED | | | | | | | | |
| (5) REPORT | | | | | | | | |
| Cover Period: From | 3/31/2008 / Report Type Q1-08 | | | | | | | |
| ☐ Original | Report | | | | | | | |
| (6) CONTRIBUTIONS THIS REPORT | (7) EXPENDITURES THIS REPORT | | | | | | | |
| Cash & Checks \$4,000.00 | Monetary Expenditures \$ 0.00 | | | | | | | |
| Loans \$ | Transfers to Office Account \$ 0.00 | | | | | | | |
| Total Monetary \$ 4,000.00 | Total Monetary \$ 0.00 | | | | | | | |
| In-Kind \$ | 0000 0000 0000 0000 0000 0000 0000 0000 0000 | | | | | | | |
| | (8) Other Distributions | | | | | | | |
| | \$ | | | | | | | |
| (9) TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date | | | | | | | |
| \$322,050.00 | \$186,538.74_ | | | | | | | |
| (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. I certify that I have examined this report and it is true, correct, and complete. | | | | | | | | |
| (Type name) (Type name) | | | | | | | | |
| ☐ Individual (only for election eering commun.) | Candidate Chairperson (only for PC, PTY & electioneering commun. organization) | | | | | | | |
| X | X | | | | | | | |
| Signature | Signature | | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name | Name Audrey M. Edmonson | | | | | | 571 | | | |
|-----------------|-------------------------|------|---|---------|-------|------|----------|---|-----------|---|
| | 1/1 | /200 | 8 | | 3/31/ | 2008 | | | | |
| (3) Cover Perio | nd | 1 | 1 | through | 1 | 1 | (4) Page | 1 | of 1 | L |

| 8 | | | | | | | |
|-----------------------------------|---|----------------|----------------------------------|----------------------|------------------------|------------------|------------------|
| 1/1/2008 | FLAGLER DEVELOPMENT GROUP, 10151 DEERWOOD PARK BLVD. BUILDING 100, SUITE 330 JACKSONVILLE, FL 32256 | . B | real developme estate n | СН | | Add | \$500. |
| 1/1/2008 | F.E.C. INDUSTRIES, INC., 7411 FULLERTON ST. SUITE 300 JACKSONVILLE, FL 33127 | В | real developme estate n | СН | | Add | \$500. |
| 1/1/2008 | FLORIDA EAST COAST RAILWAY, 7411 FULLERTON ST. SUITE 300 JACKSONVILLE, FL 32256 | В | rail road company | СН | | Add | \$500. |
| 1/1/2008 | SINCLAIT, JEAN 13500 SW 69 AVE. MIAMI, FL 33315 | I | construct ion mgmnt. | СН | | Add | \$500. |
| 1/1/2008 | RIGAUD, GINETTE 13500 SW 69 AVE. MIAMI, FL 33156 | I | educator | СН | | Add | \$500. |
| 1/1/2008 | SINCLAIT, ALEXANDRA 13500 SW 69 AVE. MIAMI, FL 33156 | \ I | construct ion mgmnt. | СН | | Add | \$500. |
| 1/1/2008 | BONNET, JEANNIFER M. 2961 - B DAY AVE. MIAMI, FL 33133 | I | educator | СН | | Add | \$500. |
| 1/1/2008 | 2961 - B DAY AVE. MIAMI, FL 33133 | | ion mgmnt. | CII | | Add | , J00 . |
| Date (6) Sequence Number | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code SICLAIT, EDOUARD | C Type I | Contributor Occupation construct | Contribution Type CH | In-kind Description | Amendment Add | Amount \$500. |
| (5) | (7) | | (8) | (9) | (10) | (11) | (12) |

| CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Audrey M. Edmonson (2) I.D. Number 571 | | | | | | | | |
|--|---|--|-----------------|-----------|--------|--|--|--|
| | 1/1/2008 /through | 3/31/2008 1// | (4) Page1 | | 0 | | | |
| (5) Date | (7) Full Name | (8) Purpose | (9) | (10) | (11) | | | |
| (6) Sequence Number | (Last, Suffix, First, Middle Street Address & City, State, Zip Code | e) (add office sou contribution t candidate) | o a Expenditure | Amendment | Amount | | | |
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