

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Barbara J. Jordan
Name
 (2) 2251 NW 188th Terrace
Address (number and street)
Miami Gardens, FL
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1043076]
 Submitted on:
 8/10/2012 16:37:13 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 1029

(4) **Check appropriate box(es):**
 Candidate (office sought): County Commission 01
 Political Committee **CHECK IF PC HAS DISBANDED**
 Committee of Continuous Existence **CHECK IF CCE HAS DISBANDED**
 Party Executive Committee **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 4/1/2012 To 7/6/2012 Report Type F1-12
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>0.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 200,804.47

(10) TOTAL Monetary Expenditures To Date
 \$ 136,835.34

(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) _____ <input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer X _____ Signature	I certify that I have examined this report and it is true, correct, and complete. (Type name) _____ <input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization) X _____ Signature
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barbara J. Jordan (2) I.D. Number 1029
 4/1/2012 through 7/6/2012
 (3) Cover Period / / through / / (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
5/23/2012 / /	Mesmer, Nasra R. 514 W. Court St. Cincinnati, OH 45203	I	info. req.	CH		Delete	\$200.00
1							
5/23/2012 / /	Mesmer, Nasra R. 514 W. Court St. Cincinnati, OH 45203	I	government	CH		Add	\$200.00
2							
6/22/2012 / /	Thompkins, Tracy Info. Req. Info. Req., In Info. Req.	I	info. req.	CA		Delete	\$100.00
3							
6/22/2012 / /	Thompkins, Tracy 2783 NW 196 St. Miami, FL 33056	I	food service	CA		Add	\$100.00
4							
7/6/2012 / /	McRae, V V Info. Req. Info. Req., In Info. Req.	I		CH		Delete	\$50.00
5							
7/6/2012 / /	McRae, V V 6920 Harding Dr. Miami, FL 33141	I		CH		Add	\$50.00
6							
7/6/2012 / /	Agrawal, Sukrit Info. Req. Info. Req., In Info. Req.	I	info. req.	CH		Delete	\$500.00
7							
7/6/2012 / /	Agrawal, Sukrit 1625 Eagle Bend Weston, FL 33327	I	healthcare	CH		Add	\$500.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barbara J. Jordan (2) I.D. Number 1029
 4/1/2012 through 7/6/2012
 (3) Cover Period / / through / / (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
7/6/2012 / /	Salman, Qurratulain 1170 SW 2nd St. Apt. 203 Pembroke Pines, FL 33029	I	info. req.	CH		Delete	\$500.00
9							
7/6/2012 / /	Salman, Qurratulain 1170 SW 2nd St. Apt. 203 Pembroke Pines, FL 33029	I	homemaker	CH		Add	\$500.00
10							
7/6/2012 / /	GMHETC, Inc., 8260 NE 2 Ave. Miami, FL 33138	B	info. req.	CH		Delete	\$500.00
11							
7/6/2012 / /	GMHETC, Inc., 8260 NE 2 Ave. Miami, FL 33138	B	healthcare	CH		Add	\$500.00
12							
7/6/2012 / /	McRae, V V Info. Req. Info. Req., In Info. Req.	I		CH		Delete	\$50.00
13							
7/6/2012 / /	McRae, V V 6920 Harding Dr. Miami, FL 33141	I		CH		Add	\$50.00
14							
6/20/2012 / /	Info Req., Info Req. Info Req., In Info Req.	I		CA		Delete	\$10.00
15							
6/20/2012 / /	Anonymous, Anonymous Anonymous, An Anonymous	I		CA		Add	\$10.00
16							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barbara J. Jordan

(2) I.D. Number 1029

(3) Cover Period 4/1/2012 through 7/6/2012

(4) Page 1 of 0

(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					
/ /					
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/ /					