

**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**  
 [1033192]  
 Submitted on:  
 2/3/2012 17:32:08 (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 10/1/2011 To 12/31/2011 Report Type Q4-11  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 0.00  
 Loans \$ 0.00  
 Total Monetary \$ 0.00  
 In-Kind \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 0.00  
 Transfers to Office Account \$ 0.00  
 Total Monetary \$ 0.00

**(8) Other Distributions**  
 \$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
 \$ 17,650.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 5,115.37

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

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

**(1) Name** Barbara J. Jordan **(2) I.D. Number** 1029  
 10/1/2011 through 12/31/2011  
**(3) Cover Period**      /      /      through      /      /      **(4) Page** 1 of 1

(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
10/26/2011 / /	Aneli Artwork, LLC,  Information Requested Miami, FL Info. Req	B	artistic services	CH		Delete	\$500.00
1							
10/26/2011 / /	Aneli Artwork, LLC,  3470 NW 82 Ave. #988 Doral, FL 33122	B	artistic services	CH		Add	\$500.00
2							
11/8/2011 / /	Force Protection Security, LLC, Information Requested Info. Requested, In Info Req	B	security	CH		Delete	\$500.00
3							
11/8/2011 / /	Force Protection Security, LLC, 3319 Spanish Wells Drive Ste. C Delray Beach, FL 33445	B	security	CH		Add	\$500.00
4							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Barbara J. Jordan

(2) I.D. Number 1029

(3) Cover Period 10/1/2011 through 12/31/2011

(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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/ /					