

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

(1) Audrey M. Edmonson

Name

(2) 1 SE 3rd Avenue

Address (number and street)

Miami, FL 33131

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(4) **Check appropriate box(es):**

Candidate (office sought): County Commission 03

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

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ONLINE SUBMISSION
[1053414]

Submitted on:
3/4/2013 14:37:51 (eastern)

(3) **ID Number:** 1040

(5) REPORT IDENTIFIERS

Cover Period: From 4/1/2012 / 7/6/2012 / 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>-5,369.29</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>-5,369.29</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 390,995.20

(10) TOTAL Monetary Expenditures To Date
\$ 386,656.62

(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) _____
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) _____
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Audrey M. Edmonson (2) I.D. Number 1040

4/1/2012 through 7/6/2012

(3) Cover Period / / through / / (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Audrey M. Edmonson

(2) I.D. Number 1040

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

(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					
5/15/2012 //	Circle of One Marketing, 2400 NE 2nd Ave. Ste. C Miami, FL 33137	marketing	MO	Delete	\$4,000.00
1					
5/15/2012 //	Circle of One Marketing, 2400 NE 2nd Ave. Ste. C Miami, FL 33137	marketing	MO	Add	\$3,000.00
2					
6/18/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	campaign signs & t-shirts	MO	Delete	\$18,994.28
3					
6/18/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	campaign signs & t-shirts	MO	Add	\$15,994.28
4					
6/11/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	phone bank srvcies	MO	Delete	\$14,400.00
5					
6/11/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	phone bank srvcies	MO	Add	\$13,200.00
6					
6/6/2012 //	Roundtree, Junita Info. Req. Info. Req., In Info. Req.	reimbursement for fundraiser	MO	Delete	\$770.46
7					
6/6/2012 //	Roundtree, Junita 5861 NW 9 AVE Miami, FL 33127	reimbursement for fundraiser	MO	Add	\$601.17
8					