

**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**

**OFFICE USE ONLY**

**ONLINE SUBMISSION**

[1053809]

Submitted on:

3/21/2013 20:11:20 (eastern)

(3) **ID Number:** 1040

**CHECK IF PC HAS DISBANDED**

**CHECK IF CCE HAS DISBANDED**

**CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**

**(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      \$ 0.00

Loans                      \$ 0.00

Total Monetary      \$ 0.00

In-Kind                      \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures      \$ 2,496.64

Transfers to Office Account      \$ 0.00

Total Monetary      \$ 2,496.64

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

**(9) TOTAL Monetary Contributions To Date**

\$ 390,095.20

**(10) TOTAL Monetary Expenditures To Date**

\$ 388,653.26

**(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					
5/24/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	ballot consulting	MO	Delete	\$3,500.00
1					
5/24/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	ballot consulting	MO	Add	\$5,000.00
2					
7/2/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	phone bank consulting	MO	Delete	\$29,480.00
3					
7/2/2012 //	Urban Initiatives, Inc., 822 NE 125 St. N. Miami, FL 33161	phone bank consulting	MO	Add	\$30,476.64
4					
//					
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