

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

(1) Carolyn W. Jones
Name

(2) 722 SW 3rd Street
Address (number and street)

Dania Bch, FL 33004
City, State, Zip Code

OFFICE USE ONLY

RECEIVED

MAR 12 2010

BY: [Signature]

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City Commission Dania Bch

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

(5) REPORT IDENTIFIERS

Cover Period: From 12/21/09 To 2/19/10 Report Type G1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 12,430.00

Loans \$ 100.00

Total Monetary \$ _____

In-Kind \$ 710.20

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 8,690.69

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 12,530.00

(10) TOTAL Monetary Expenditures To Date

\$ 8,690.69

(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) Lottie H. Crooms

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Lottie H. Crooms
Signature

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

(Type name) Carolyn W. Jones

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

X Carolyn W. Jones
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Carolyn W. Jones

(2) I.D. Number _____

(3) Cover Period 12/21/09 through 2/19/10

(4) Page _____ of _____

(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					
2/1/10 000023	Broward County Office of Elections 115 S. Andrews Ave Ft. Lauderdale, FL 33301	SOE	Dis	Del	\$ 14.75
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