	OF COCOA			
CAMPAIGN TREASURER	R'S REPORT SUMMARY			
(1) NESNER ST V. L	OFFICE USE ONLY			
(2) 4551 NW 494h Court	OFFICER			
Address (number and street) COCONUT CREEK, FL 330	77			
City, State, Zip Code				
Check here if address has changed	(3) ID Number:			
Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed			
(5) Report	Identifiers			
	12 1 31 1 2020 Report Type: 2020112			
	cial Election Report			
(6) Contributions This Report	(7) Expenditures This Report			
Cash & Checks \$, , <i>(</i>) · _ <i>(</i>) <i>(</i>	Monetary Expenditures \$,, 119.28			
Loans \$,, <u>0</u> . <u>0</u> 0	Transfers to Office Account \$,,			
Total Monetary \$, , <u>0</u> . <u>0</u> 0	Total Monetary \$, 119. 28			
In-Kind \$,, <u>0</u> . <u>0</u> 0	,, <u></u> ,, <u></u>			
	(8) Other Distributions			
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date			
\$, <u>500, 00</u>	\$, , <u>119 · 28</u>			
(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, corr				
(Type name) MARIE Joe N. Edouard ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer	(Type name) WESNER ST V/ [Candidate Chairperson (only for PC and PTY)]			
x Have A. Edouard	× M			
Signature	Signature			

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle) Street Address &	Co	(8) ontributor	(9)	(10)	(11)	(12)
Sequence Number	City, State, Zip Code	Туре	Occupation	Type	Description	Amendment	Amount
N/ 1	N/A	71		,	N/A	N/A	
1 1							
1 1							
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1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZE	ED EXPENDITUR	ES JAN - 4 2021
1) Name WESNER ST. VIL	(2) I.D. Number	
(3) Cover Period 12 10 1 130 through 12 131 12020	(4) Page	of LING OFF

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/10/20	BANKOF AMERICA 5590 WEST SAMPLE RD MARCHATE, FL 33073	CHECK ORDER	CAN		15,28
12/30/20	NationBuilder POBOX 811428 LOS ANGELES, CA 9008)	DONATIONS & VOTERS data base Platform	CAN		104
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