

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Veronica Edwards Phillips
 Name
 (2) 3521 NW 24 Street
 Address (number and street)
Lauderdale Lakes, Florida 33311
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commissioner Seat #3
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 04 / 01 / 2020 To 04 / 30 / 2020 Report Type: M4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$	____	,	____	,	00	.	00
Loans	\$	____	,	____	,	00	.	00
Total Monetary	\$	____	,	____	,	00	.	00
In-Kind	\$	____	,	____	,	00	.	00

(7) Expenditures This Report

Monetary Expenditures	\$	____	,	____	,	00	.	00
Transfers to Office Account	\$	____	,	____	,	00	.	00
Total Monetary	\$	____	,	____	,	00	.	00

(8) Other Distributions

\$ _____, _____, 00 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 1600 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 00 . 00

(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) James Edward Phillips
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
 Signature

(Type name) Veronica Edwards Phillips
 Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Veronica Edwards Phillips Name (2) I.D. Number _____

(3) Cover Period 04/ 01 / 2020 through 04 / 30 / 2020 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		Amount
/ /	NO CONTRIBUTIONS						
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Veronica Edwards Phillips (2) I.D. Number _____

(3) Cover Period 04 / 01 / 2020 through 04 / 30 / 2020 (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					
/ /	NO EXPENDITURES				
/ /					
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