

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

OFFICE USE ONLY

**RECEIVED**  
AUG 10 2012  
THE CITY OF WESTON

(1) Daniel Dickey  
Name  
(2) 2532 Montclair Ct.  
Address (number and street)  
Weston, FL 33327  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 00000

(4) Check appropriate box(es):

Candidate (office sought): Weston City Commission Seat 1

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 07 / 21 / 12 To 08 / 09 / 12 Report Type F-3

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>\$0.00</u> |
| Transfers to Office Account | \$ | <u>\$0.00</u> |
| Total Monetary              | \$ | <u>\$0.00</u> |

(8) Other Distributions  
\$ \$0.00

(9) TOTAL Monetary Contributions To Date  
\$ \$400.00

(10) TOTAL Monetary Expenditures To Date  
\$ \$336.87

**(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.

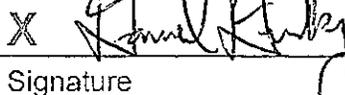
I certify that I have examined this report and it is true, correct, and complete.

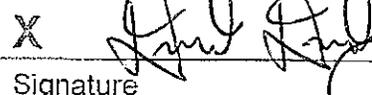
(Type name) Daniel Dickey

(Type name) Daniel Dickey

Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

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

  
Signature

  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Daniel Dickey (2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 21 / 12 through 08 / 09 / 12 (4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle) | (8)                 |            | (9)                  | (10)                   | (11)      | (12)   |
|---------------------------|---|---------------------|------------|----------------------|------------------------|-----------|--------|
| (6)<br>Sequence<br>Number | Street Address &<br>City, State, Zip Code         | Contributor<br>Type | Occupation | Contribution<br>Type | In-kind<br>Description | Amendment | Amount |
| 08 / 09 / 12              | Nothing to report                                 |                     |            |                      |                        |           |        |
| 000001                    |   |                     |            |                      |                        |           |        |
| / /                       |   |                     |            |                      |                        |           |        |
| / /                       |   |                     |            |                      |                        |           |        |
| / /                       |   |                     |            |                      |                        |           |        |
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| / /                       |   |                     |            |                      |                        |           |        |

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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Daniel Dickey

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 21 / 12 through 08 / 09 / 12

(4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  |  |                            |                   |                |
| 08 / 09 / 12              | Nothing to report  |  |                            |                   |                |
| 000001                    |  |  |                            |                   |                |
| / /                       |  |  |                            |                   |                |
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