

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

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

OFFICE USE ONLY

RECEIVED

SEP 20 2012

THE CITY OF WESTON

(3) ID Number: 00000

CHECK IF ADDRESS HAS CHANGED

(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 08 / 10 / 12 To 09 / 14 / 12 Report Type G-1

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.

(Type name) Daniel Dickey
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

[Signature]
Signature

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

(Type name) Daniel Dickey
 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 08 / 10 / 12 through 09 / 14 / 12 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)		(9)	(10)	(11)	(12)
(6) Sequence Number		Contributor Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
09 / 12 / 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 08 / 10 / 12 through 09 / 14 / 12

(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
09 / 12 / 12	Nothing to report				
000001					
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