

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) BRUCE B. BALDIWN
 Name
 (2) 5735 SUNSET DRIVE
 Address (number and street)
SOUTH MIAMI, FL 33143
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es): MAYOR OF SOUTH MIAMI
 Candidate Office Sought: _____
 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 10/01/2019 / _____ To 10/31/2019 / _____ Report Type: M10
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks	\$ <u>95.00</u> , _____ , _____ . _____
Loans	\$ <u>0.</u> , _____ , _____ . _____
Total Monetary	\$ <u>95.00</u> , _____ , _____ . _____
In-Kind	\$ <u>0.</u> , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures	\$ <u>20.00</u> , _____ , _____ . _____
Transfers to Office Account	\$ <u>0.</u> , _____ , _____ . _____
Total Monetary	\$ <u>20.00</u> , _____ , _____ . _____

(8) Other Distributions
 \$ 0. , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date
 \$ 6,010.00 , _____ , _____ . _____

(10) TOTAL Monetary Expenditures To Date
 \$ 1,374.39 , _____ , _____ . _____

(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:

BRUCE B. BALDWIN
 (Type name)
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X
 Signature

BRUCE B. BALDWIN
 (Type name)
 Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

BRUCE B. BALDWIN

(1) Name _____

(2) I.D. Number _____

(3) Cover Period 10/01/2019 / / through 10/31/2019 / /

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
10/04/2019 / / 1	SCOTT BALDWIN 510 NE 49TH ST. FT. LAUDERDALE, FL 33334	IND		CHE			\$50.00
10/26/2019 / / 2	TERRY WINDS 3521 WILLIAM AVE. MIAMI, FL 33133	IND		CHE			\$20.00
10/27/2019 / / 3	DEBRA TORRES 3507 SW 112 CT. MIAMI, FL 33165	IND		CHE			\$25.00
/ /	<div style="border: 2px solid red; padding: 5px; color: red; font-weight: bold; font-size: 1.2em;"> RECEIVED NOV 12 2019 CITY CLERK'S OFFICE </div>						
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name BRUCE B. BALDWIN

(2) I.D. Number _____

(3) Cover Period 10/01/2019 / _____ / _____ through 10/31/2019 / _____ / _____

(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
10/16/2019	CITY NATIONAL BANK	SERVICE FEE	CAN		\$20.00
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