

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

(1) Dr. Smith Joseph
Name

(2) 2100 Sans Souci Blvd B706
Address (number and street)

North Miami, FL 33181
City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

☒ Candidate (office sought): _____

☐ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

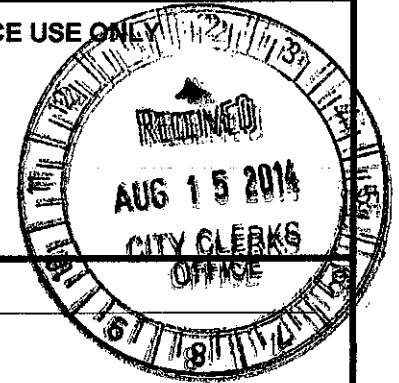
☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

OFFICE USE ONLY



(5) REPORT IDENTIFIERS

Cover Period: From 08 / 02 / 2014 To 08 / 08 / 2014 Report Type 2014 P6

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 5,850.00

Loans \$ 25,000.00

Total Monetary \$ 30,850.00

In-Kind \$ 1,000.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 30,266.54

Transfers to Office Account \$ _____

Total Monetary \$ 30,266.54

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 145,145.50

(10) TOTAL Monetary Expenditures To Date

\$ 132,584.20

(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) Aland Pierre-Canel

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

X [Signature]
Signature

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

(Type name) Smith Joseph

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

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Dr, smith Joseph (2) I.D. Number _____

(3) Cover Period 08 / 02 / 14 through 08 / 08 / 14 (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number						
08 / 08 / 14	Joel Henriquez Poliard MD 5000 NE 2nd Avenue Miami, FL 33137	B Doctor's Office	CHE			150.00
1						
08 / 08 / 14	Frantz Devilmé 15112 SW 54th Street Miramar, FL 33027	I Airport Manager	CHE			100.00
2						
08 / 08 / 14	Dr. Rudolph Moise 12947 Equestrian Trail Davie, FL 33330	I Physi- cian	CHE			1000.00
3						
08 / 08 / 14	Casthely Orthodontics, P.A. 1400 NE Miami Gardens DR. STE 101 Miami, FL 33	B Doctor' s office	CHE			500.00
4						
08 / 08 / 14	Pinel Medical Center Inc 128 NE 54th Street Miami, FL 33137	B Doctor' s Office	CHE			500.00
5						
08 / 08 / 14	Joseph Surgery 9415 NE 6th Avenue Miami Shores, FL 33138	B Doctor' s Office	CHE			600.00
6						
08 / 08 / 14	Sunrise Medical Center, P.A. 5211 NE 2nd Avenue Miami, FL 33137	B Medical Office	CHE			500.00
7						
08 / 08 / 14	Ranley Desir, M.D., PA 7901 SW 67th Terrace Miami, FL 33143	B Doctor' s Office	CHE			1000.00
8						

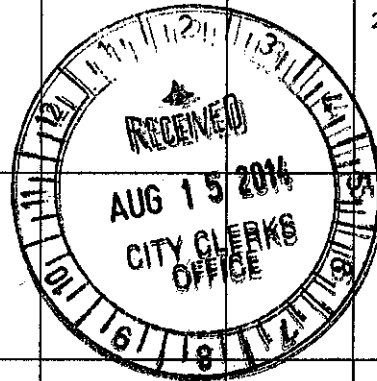


CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Dr. Smith Joseph (2) I.D. Number _____

(3) Cover Period 08 / 02 / 14 through 08 / 08 / 14 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
08 / 08 / 14	Pains Et Gateaux LLC 1380 N. Krome Ave Unit 113 Florida City, FL 33034	B	Bakery	CHE			1,000.00
9							
08 / 08 / 14	Ventura De Paz 2950 NE 188 St Apt 302 Aventura, FL 33180	I	Info Request ed	CHE			500.00
10							
08 / 08 / 14	Kominote Haitienne 666 NE 125th Suite 229 N. Miami, FL 33161	B	Media	INK	Media Ad		1,000.00
11							
08 / 08 / 14	Smith Joseph, DO, PA 13377 W. Dixie Hwy North Miami, FL 33161	B	Physici an	LOA			25,000.00
12							
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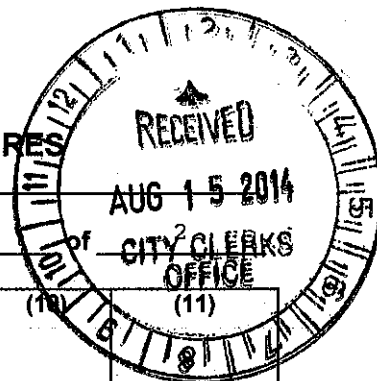
CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURE

(1) Name Dr. Smith Joseph

(2) I.D. Number _____

(3) Cover Period 08 / 02 / 14 through 08 / 08 / 14

(4) Page 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
08 / 02 / 14	Yvannka Consultants, Inc 6500 Arthur Street Hollywood, FL 33024	Media	MON		\$3,000.00
1					
08 / 02 / 14	Sinal Consulting Group, LLC 18840 NW 56th CT. Miami, FL 33055	Consulting	MON		\$5,000.00
2					
08 / 08 / 14	Marsha Steril 1005 NW 128th Street North Miami, FL 33168	Campaign Coordination	MON		\$600.00
3					
08 / 08 / 14	Marsha Steril 1005 NW 128th Street North Miami, FL 33168	Canvassing Team	MON		\$2,410.00
4					
08 / 08 / 14	Spanish Broadcasting System 2601 S. Bayshore DR. , Fl 5 Miami, FL 33133	Latin Media	MON		\$3,220.00
5					
08 / 08 / 14	Edgard Bruneau 13925 NE 6th Avenue # 314 North Miami, FL 33161	Media	MON		\$3,500.00
6					
08 / 08 / 14	Edgard Bruneau 13925 NE 6th Avenue # 314 North Miami, FL 33161	Media	MON		\$3,925.00
7					
08 / 08 / 14	Radio Mega 75 NW 167th Street North Miami Beach, FL 33169	Media	MON		\$4,000.00
8					

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Dr. Smith Joseph

(2) I.D. Number _____

(3) Cover Period 08 / 02 / 14 through 08 / 08 / 14

(4) Page 2 of 2

(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
08 / 08 / 14	Edgard Bruneau 13925 NE 6th Avenue # 314 North Miami, FL 33161	Media	MON		\$3,500.00
9					
08 / 08 / 14	Jean Alisma 1055 NE 125 St N. Miami, FL 33161	Media	MON		\$1,000.00
10					
08 / 08 / 14	Richard Durameau 12942 W. Dixie Hwy North Miami, FL 33161	Refreshments & Office Supplies	MON		\$111.54
11					
/ /					
/ /					
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