

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY


RECEIVED

2018 APR 17 PM 2:03

CRMS CITY CLERK'S OFFICE

I, Michael Joseph ,
candidate for the office of Commissioner, Group 7 ;
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X



Signature of Candidate

04-13-18

Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

RECEIVED

2018 MAY 14 PM 12:01

CHMB CITY CL OFFICE USE ONLY

Michael Joseph

Name

Commissioner, Group 7

Office Sought

P.O. Box No. 613635

Address

North Miami Beach

City

FL

State

33261

Zip Code

Candidate

Political Committee

Party Executive Committee

NOTE: This form does not apply to an electioneering communications organization (ECO). An ECO must file a report (not a waiver) that no reportable contributions or expenditures were made during the reporting period (s. 106.0703(6), F.S.).

Check here if address has changed since last report.

Check here if PC has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box and Complete Applicable Line beneath Box)

MONTHLY REPORT

PRIMARY ELECTION

GENERAL ELECTION

OTHER REPORT TYPE

Indicate report #

M _____

Indicate report #

P _____

Indicate report #

G _____

Indicate report type and # as applicable:

TERMINATION REPORT SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

4-1-18

THROUGH

4-30-18

X

[Signature]

Signature

4-30-18

Date

X

[Signature]

Signature

4-30-18

Date

REQUIRED SIGNATURES FOR:

Candidates:

Candidate and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees:

Chairman and Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Party Executive Committees:

Treasurer and Chairman (s. 106.29(2), F.S.)

Except as noted above for an ECO, in any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

CAMPAIGN TREASURER'S REPORT SUMMARY

RECEIVED

(1) Michael Joseph
Name

(2) P.O. Box No. 613635
Address (number and street)
North Miami Beach, FL 33261
City, State, Zip Code

OFFICE USE ONLY

2018 JUN 15 PM 1:56 PM 1:56

CNMB CITY CLERK'S OFFICE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Commissioner, Group 7
- 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 05 / 01 / 2018 To 05 / 31 / 2018 Report Type: M

- Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , 1,000 . 00

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 1.00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 1000 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 1.00

(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) Michael Joseph

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

X
Signature

(Type name) Michael Joseph

Candidate Chairperson (only for PC and PTY)

X
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Joseph

(2) I.D. Number _____

(3) Cover Period 05 / 01 / 2018 through 05 / 31 / 2018

(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					
05 / 18 / 2018	TD Bank 1500 NE Miami Gardens Dr, North Miami, FL 33179		CAN		1.00
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