

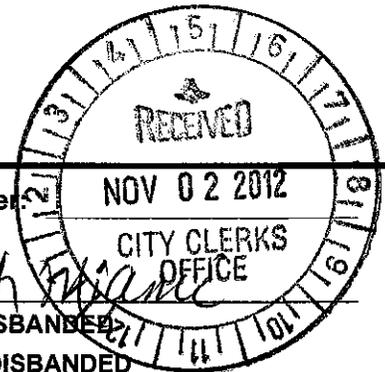
**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) ANNA L. PIERRE, RN-MPH
Name

(2) 13100 NE 12 AVE
Address (number and street)

NORTH MIAMI, FL 33161
City, State, Zip Code

OFFICE USE ONLY



CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): MAYOR, City of North Miami

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

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 13 / 12 To 11 / 01 / 12 Report Type _____

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1,030.00

Loans \$ 150.00

Total Monetary \$ 1,180.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1,096.00

Transfers to Office Account \$ _____

Total Monetary \$ 1,096.00

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,180.00

(10) TOTAL Monetary Expenditures To Date

\$ 1,096.00

(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) BERNADETTE JEANITON

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Bernadette Jeaniton
Signature

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

(Type name) ANNA L. PIERRE

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

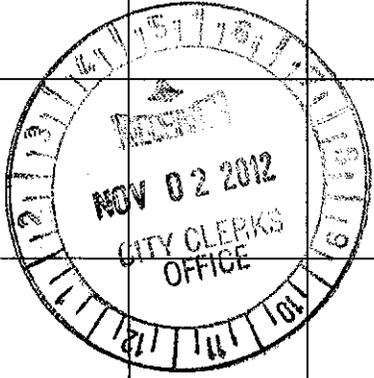
X Anna L. Pierre
Signature

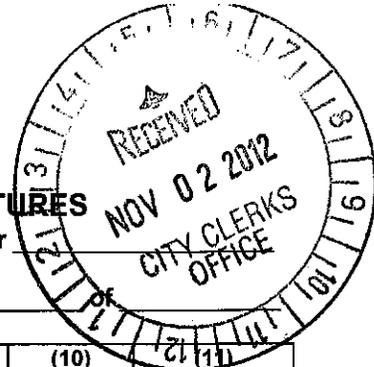
CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name ANNA L. PIERRE, RN-MPH (2) I.D. Number _____

(3) Cover Period 10 / 13 / 12 through 11 / 01 / 12 (4) Page _____ of _____

(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							
10 / 23 / 12	SENATOR STEINBERG, PAUL B 767 ARTHUR GODFREY RD MIAMI BEACH, FL 33140	I	LAWYER	CHECK			500.00
10 / 23 / 12	RENE, JACQUES 905 NW 134 ST NORTH MIAMI, FL 33168	I	RETIRED	MONEY ORDER			30.00
10 / 31 / 12	BRICE, GARRY 2015 SW 159 AVE MIRAMAR, FL 33027	I	INSUR. AGENT	CHECK			300.00
11 / 01 / 12	PIERRE, JEANNETTE 18831 NE 3 RD CT APT-513 MIAMI, FL 33179	I	STAY @ HOME MOTHER	CASH			200.00
10 / 01 / 12	ANNA L. PIERRE 13100 NE 12 AVE NORTH MIAMI, FL 33161	I	REGISTR ED NURSE	CASH			150.00
/ /							
/ /							
/ /							
/ /							





CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name ANNA L. PIERRE, RN-MPH

(2) I.D. Number _____

(3) Cover Period 10 / 13 / 12 through 11 / 01 / 12

(4) Page _____

(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	Amount
10 / 01 / 12	CHASE BANK-CAMPAIGN TO ELECT ANNA L. PIERRE RN FOR MAYOR OF NORTH MIAMI		OPENING ACCOUNT AND CHECK ORDER		\$120.00
10 / 02 / 12	DOMAIN.COM		CAMPAIGN WEBSITE PURCHASE		\$20.00
10 / 02 / 12	OFFICE DEPOT BYSCAYNE BLVD <i>125 Street</i>		OFFICE SUPPLIES		\$10.00
10 / 25 / 12	METRO PCS NORTH MIAMI 11854 BYSCAYNE BLVD BYSCAYNE PARK, FL 33181	CAMPAIGN PHONE	COMMUNIC ATION		\$106.00
10 / 25 / 12	METRO PCS NORTH MIAMI 11854 BYSCAYNE BLVD BYSCAYNE PARK, FL 33181	CAMPAIGN PHONE PURCHASE	PHONE CONNECTI ON		\$55.00
10 / 27 / 12	HAITIAN SENIOR STARS SOLIDARITY GROUP, INC 850 NW 199 ST MIAMI, FL 33169	MEDIA ADVERTISING AND PRINT	CAMPAIGN PROMOTIO N		\$500.00
11 / 01 / 12	XPERTS SIGNS AND PRINTING 12122 NW 7 AVE NORTH MIAMI, FL 33150	FOR SIGNS AND MAGNETS	CAMPAIGN ADV. AND PROMOTIO N		\$160.00
11 / 01 / 12	MR PRODUCTS, LLC 1470 NE 151 ST #103 NORTH MIAMI BEACH, FL 33162	CAMPAIGN T-SHIRTS	CAMPAIGN ADV. AND PROMOTIO N		\$125.00