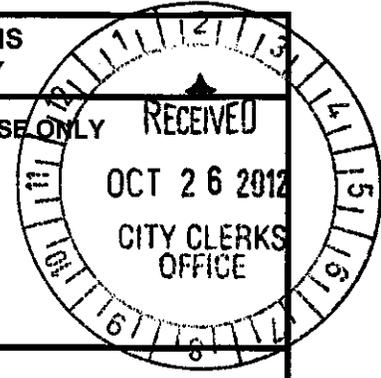


**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**



(1) SMITH JOSEPH CAMPAIGN
Name

(2) 685 NE 126 STREET
Address (number and street)

NORTH MIAMI, FL. 33161
City, State, Zip Code

OFFICE USE ONLY
RECEIVED
OCT 26 2012
CITY CLERKS
OFFICE

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 09 / 29 / 2012 To 10 / 12 / 2012 Report Type G3
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____ 0.00
 Loans \$ _____ 0.00
 Total Monetary \$ _____ 0.00
 In-Kind \$ _____ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____ 550.00
 Transfers to Office Account \$ _____ 0.00
 Total Monetary \$ _____ 550.00

(8) Other Distributions
 \$ _____ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ _____ 33,700.00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ 13,637.08

(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) PAUL E. MANIGAT
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X _____
 Signature

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

(Type name) DR. SMITH JOSEPH
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name SMITH JOSEPH CAMPAIGN (2) I.D. Number _____

(3) Cover Period 09 / 29 / 2012 through 10 / 12 / 2012 (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 | | | | | |
| 10 / 01 / 12 | ANDRE AUBRY 1055 NE 125TH ST. N. MIAMI, FL. 33161 | RADIO ADVERTISING | MON | | \$200.00 |
| 1 | | | | | |
| 10 / 01 / 12 | WISLY JANVIER 786-222-6773 | RADIO ADVERTISING | MON | | \$150.00 |
| 2 | | | | | |
| 10 / 05 / 12 | LUDNER PLAISIR 1510 NE 162 ST NMB, FL. 33162 | RADIO ADVERTISING | MON | | \$200.00 |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name SMITH JOSEPH CAMPAIGN

(2) I.D. Number _____

(3) Cover Period 09 / 29 / 2012 through 10 / 12 / 2012

(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 |
|-------------|--|--------------------|------------|-----------------------------|--------------------------------|-------------------|----------------|
| | | Type | Occupation | | | | |
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