

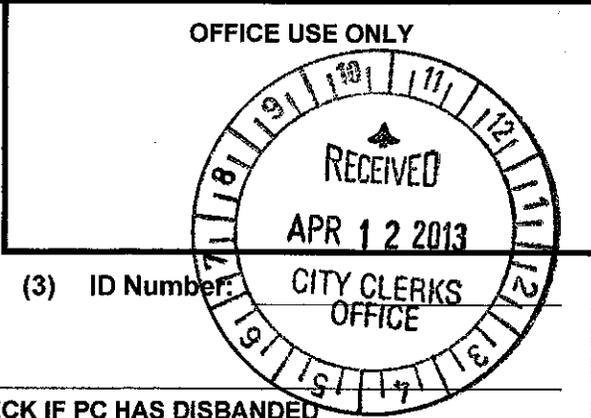
**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Gwendolyn V. Boyd  
Name

(2) P.O. Box 681246  
Address (number and street)

North Miami, FL 33168  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED



(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate (office sought): Mayor of North Miami

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 04 / 01 / 13 To 04 / 05 / 13 Report Type \_\_\_\_\_

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ \_\_\_\_\_ 0.00

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ 0.00

In-Kind \$ \_\_\_\_\_

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ \_\_\_\_\_ 1,396.50

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ 1,396.50

(8) Other Distributions \$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ 51,380.32

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ 29,321.78

**(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.

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

(Type name) Edwin Cintron

(Type name) Gwendolyn V. Boyd

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

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

*Edwin Cintron*

*Gwendolyn V. Boyd*

Signature

Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Gwendolyn V. Boyd

(2) I.D. Number \_\_\_\_\_

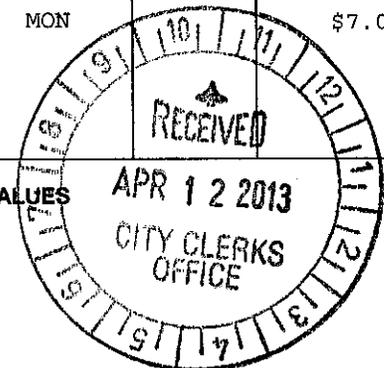
(3) Cover Period 04 / 01 / 13 through 04 / 05 / 13

(4) Page 1 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
04 / 01 / 13	Cohen, Melvin 3120 NW 48th Terr. Miami, FL 33127	Campaign Worker	MON		\$192.50
63					
04 / 01 / 13	Brooks, Leah 19555 NW 5th Avenue Miami, FL 33169	Campaign Supervisor	MON		\$495.00
64					
04 / 01 / 13	Moise, Johanna 1730 SE 148th Street North Miami, FL 33181	Campaign Worker	MON		\$290.00
65					
04 / 01 / 13	Thomas, Crystal 401 NW 59th Terr. Miami, FL 33127	Campaign Worker	MON		\$82.50
66					
04 / 02 / 13	Ware, Beverly 12015 NW Miami Ct. Miami, FL 33168	Campaign Worker	MON		\$100.00
67					
04 / 02 / 13	Board of County Commissioners 111 NW 1st Street, Suite 220 Miami, Florida 33128	Verification	MON		\$14.00
68					
04 / 02 / 13	Board of County Commissioners 111 NW 1st Street, Suite 220 Miami, Florida 33128	Verification	MON		\$13.00
69					
04 / 02 / 13	Board of County Commissioners 111 NW 1st Street, Suite 220 Miami, Florida 33128	Verification	MON		\$7.00
70					

DS-DE 14 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES



## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Gwendolyn V. Boyd

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 04 / 01 / 13 through 04 / 05 / 13

(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
(6) Sequence Number					
04 / 04 / 13  71	Martin, Ileana 19555 NW 5th Avenue Miami, FL 33169	Campaign Worker	MON		\$82.50
04 / 05 / 13  72	Lumpkin, Sharon 19555 NW 5th Avenue Miami, FL 33169	Campaign Worker	MON		\$120.00
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