

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

(1) CARLINE M. PAUL  
Name

(2) 12215 NW MIAMI COURT  
Address (number and street)

NORTH MIAMI, FL 33168  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):

Candidate (office sought): NORTH MIAMI CITY COUNCIL DISTRICT 4

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

OFFICE USE ONLY  
**RECEIVED**  
APR 27 2015  
CITY OF NORTH MIAMI  
CITY CLERKS OFFICE  
(3) ID Number: \_\_\_\_\_

**(5) REPORT IDENTIFIERS**

Cover Period: From 05 / 08 / 2014 To 05 / 23 / 2015 Report Type \_\_\_\_\_

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ 1,119.33

Loans    \$ 0.00

Total Monetary    \$ 1,119.33

In-Kind    \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures    \$ 25.67

Transfers to Office Account    \$ 0.00

Total Monetary    \$ 25.67

(8) Other Distributions    \$ 0.00

(9) TOTAL Monetary Contributions To Date  
\$ 1,119.33

(10) TOTAL Monetary Expenditures To Date  
\$ 25.67

**(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) JEANNOT BELIZAIRE

Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

**X** Jeannot Belizaire  
Signature

(Type name) CARLINE M. PAUL

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

**X** Carline M. Paul  
Signature

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**(5) REPORT IDENTIFIERS**

Cover Period: From 06 / 01 / 2014 To 06 / 30 / 2014 Report Type \_\_\_\_\_

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ \_\_\_\_\_ 0.00

Loans    \$ \_\_\_\_\_ 1,000.00

Total Monetary    \$ \_\_\_\_\_ 1,000.00

In-Kind    \$ \_\_\_\_\_ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures    \$ \_\_\_\_\_ 0.00

Transfers to Office Account    \$ \_\_\_\_\_ 0.00

Total Monetary    \$ \_\_\_\_\_ 0.00

**(8) Other Distributions**

\$ \_\_\_\_\_ 0.00

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

\$ \_\_\_\_\_ 2,119.33

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

\$ \_\_\_\_\_ 25.67

**(11) CERTIFICATION**

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Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

**X** Jeannot Belizaire  
Signature

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(Type name) CARLINE M. . PAUL

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

**X** Carline M. Paul  
Signature



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**(5) REPORT IDENTIFIERS**

Cover Period: From 12 / 01 / 2014 To 12 / 30 / 2014 Report Type \_\_\_\_\_

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 \$ 0.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions \$ 0.00

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

\$ 3,359.33

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

\$ 25.67

**(11) CERTIFICATION**

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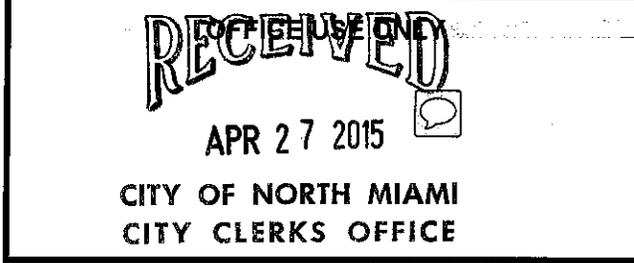
(Type name) JEANNOT BELIZAIRE  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

**X** Jeannot Belizaire  
Signature

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**X** Carline M. Paul  
Signature



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**(5) REPORT IDENTIFIERS**

Cover Period: From 01 / 01 / 2015 To 01 / 31 / 2015 Report Type \_\_\_\_\_

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 \$ 500.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 500.00

**(8) Other Distributions**

\$ 0.00

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

\$ 3,359.33

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

\$ 525.67

**(11) CERTIFICATION**

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

**X** Carline M. Paul  
Signature

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APR 27 2015

CITY OF NORTH MIAMI  
CITY CLERKS OFFICE

# CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Carline Paul

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

(3) Cover Period 01 / 01 / 2015 through 01 / 31 / 2015

(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					
01 / 13 / 15	Progressive Rags 2040 NE 163 rd Street#210 NMB, Fl 33162		DIS		\$250.00
1					
01 / 13 / 15	Mr. Copy Printing 3683 NW 135 Street Opa-Loka, Fl 33054		DIS		\$250.00
/ /					
/ /					
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CITY CLERKS OFFICE

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**(5) REPORT IDENTIFIERS**

Cover Period: From 02 / 01 / 2015 To 02 / 28 / 2015 Report Type \_\_\_\_\_

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 \$ 675.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 675.00

(8) Other Distributions \$ 0.00

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

\$ 3,359.33

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

\$ 1,200.67

**(11) CERTIFICATION**

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 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

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Signature

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

**X** Carline M. Paul  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Carline Paul

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

(3) Cover Period 02 / 02 / 2015 through 02 / 28 / 2015

(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					
02 / 23 / 15	Mr. Copy Printing 3683 NW 135 Street Opa-Loka, Fl 33054		DIS		\$675.00
1					
/ /					
/ /					
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