

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

(1) CARLINE 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): \_\_\_\_\_

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

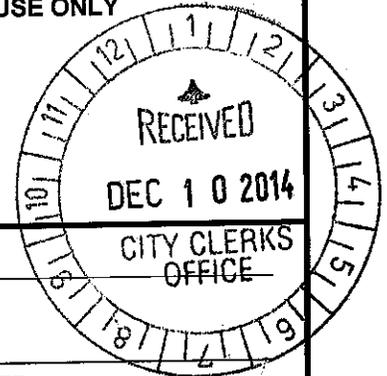
CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

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

OFFICE USE ONLY



**(5) REPORT IDENTIFIERS**

Cover Period: From 11 / 01 / 14 To 11 / 30 / 14 Report Type \_\_\_\_\_

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks        \$ 100.00

Loans                    \$ 0.00

Total Monetary        \$ 100.00

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  
\$ 3,399.33

(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.

(Type name) Paulette Nadine White

Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

**X** [Signature]  
Signature

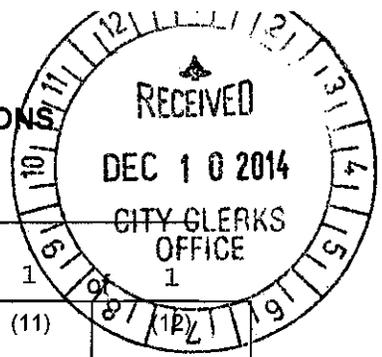
I certify that I have examined this report and it is true, correct, and complete.

(Type name) CARLINE MARIE PAUL

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

**X** [Signature]  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**



(1) Name Carline Paul

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

(3) Cover Period 11 / 01 / 2014 through 11 / 30 / 2014

(4) Page 1 of 1

| (5)<br>Date    | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor |            | (9)<br>Contribution | (10)<br>In-kind | (11)<br>Amendment | Amount   |
|----------------|--|--------------------|------------|---------------------|-----------------|-------------------|----------|
|                |  | Type               | Occupation | Type                | Description     |                   |          |
| 11 / 05 / 2014 | Claude Remy  | I                  | Mechanic   | CHE                 |                 |                   | \$100.00 |
| 1              |  |                    |            |                     |                 |                   |          |
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| 2              |  |                    |            |                     |                 |                   |          |
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