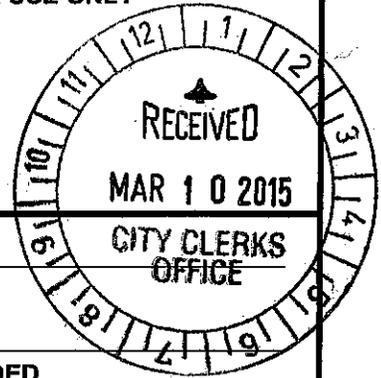


**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY



(1) Alix Desulme Campaign
Name
(2) 830 NW 133rd Street
Address (number and street)
North Miami, Florida 33168
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(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

(5) REPORT IDENTIFIERS

Cover Period: From 02 / 01 / 15 To 02 / 28 / 15 Report Type 2015-M02

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 235.00

Loans \$ 1,000.00

Total Monetary \$ 1,000.00

In-Kind \$ 1,500.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0.00

Transfers to Office Account \$ _____

Total Monetary \$ 0.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 2,735.00

(10) TOTAL Monetary Expenditures To Date

\$ 0.00

(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.

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

(Type name) Marie Joseph

(Type name) Alix Desulme

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

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

X *Marie Joseph*
Signature

X *Alix Desulme*
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Alix Desulme Campaign (2) I.D. Number _____

(3) Cover Period 02 / 01 / 15 through 02 / 28 / 15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9)	(10)	(11)	(12)
		Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
02 / 24 / 15	Alix Desulme 830 NW 133rd St. North Miami, Fl 33168	I	Educator	LOA			\$ 1000.00
1							
02 / 25 / 15	Marie Joseph 745 NE 155th St. North Miami Beach Florida 33162	I	Self-Emp loyed	INK	Consulting		\$ 750.00
2							
02 / 25 / 15	Daniel B. Calixte 13500 NE 3rd Court North Miami, FL 33161	I	Health Administ rator	INK	Consulting & Field Manager		\$ 750.00
3							
02 / 25 / 15	Stenley Jean 530 NE 133rd St North Miami, FL 33161	I	Student	Che			\$ 10.00
4							
02 / 25 / 15	Cindy Lerner 5901 Moss Ranch Rd Pinecrest, FL 33156	I	Lawyer/ Mayor	Che			\$ 150.00
5							
02 / 26 / 15	Hope Buchanan 14341 NW 13rd RD. Miami, Fl 33167	I	Executiv e Secretar y	Che			\$ 50.00
6							
02 / 28 / 15	JLB Consulting 9104 SW 19th Pl. Unit B. Davie, Fl 33324	B	Consulti ng	Che			\$ 25.00
/ /							
/ /							

