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

(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

(5) REPORT IDENTIFIERS
Cover Period: From 07/21/12 To 08/09/12
Report Type P3
☑ Original  ☐ Amendment  ☐ Special Election Report  ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT
Cash & Checks $ 5,040.00
Loans $
Total Monetary $ 5,040.00
In-Kind $

(7) EXPENDITURES THIS REPORT
Monetary Expenditures $ 91.69
Transfers to Office Account $
Total Monetary $ 91.69

(8) Other Distributions $

(9) TOTAL Monetary Contributions To Date $ 7,540.00

(10) TOTAL Monetary Expenditures To Date $ 2,248.62

(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)  
☑ Individual (only for electioneering commun.)  ☑ Treasurer  ☐ Deputy Treasurer
☐ Candidate  ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

Signature

DS-DE 12 (Rev. 08/04)
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
☐ 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 07 / 21 / 12 To 08 / 09 / 12
Report Type F3
☑ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT
Cash & Checks $ 5,040.00
Loans $ 0.00
Total Monetary $ 5,040.00
In-Kind $ 0.00

(7) EXPENDITURES THIS REPORT
Monetary Expenditures $ 91.69
Transfers to Office Account $ 0.00
Total Monetary $ 91.69

(8) Other Distributions $ 0.00

(9) TOTAL Monetary Contributions To Date $ 7,540.00

(10) TOTAL Monetary Expenditures To Date $ 2,155.19

(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) Edwin Cintron
[Signature]
☑ Individual (only for electioneering commun.) ☑ Treasurer ☐ Deputy Treasurer

(Type name) Gwendolyn V. Boyd
[Signature]
☑ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

DS-DE 12 (Rev. 08/04)
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<tr>
<th>(3) Cover Period</th>
<th>(5) Date</th>
<th>(6) Sequence Number</th>
<th>(7) Full Name</th>
<th>(8) Contributor Type</th>
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<th>(10) Contribution Type</th>
<th>(11) In-kind Description</th>
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<td>3</td>
<td>Boyd, Gwendolyn</td>
<td>I</td>
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<td>Check</td>
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DS-DE 13 (Rev. 08/03)  
SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES
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<th>(5) Date</th>
<th>(6) Sequence Number</th>
<th>(7) Full Name (Last, Suffix, First, Middle) Street Address &amp; City, State, Zip Code</th>
<th>(8) Purpose (add office sought if contribution to a candidate)</th>
<th>(9) Expenditure Type</th>
<th>(10) Amendment</th>
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DS-DE 14 (Rev. 08/03)  SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES