

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

(1) Andre D. Joyce
Name

(2) 1526 N.W. 58 Terrace
Address (number and street)

Miami, FL 33142
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

RECEIVED
OFFICE USE ONLY
2010 SEP 20 AM 11:38
PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

(3) ID Number: 158

(4) Check appropriate box(es):

Candidate (office sought): Commissioner - District 5

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 8 / 18 / 10 To 9 / 16 / 10 Report Type M1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1,235.00

Loans \$ 0.00

Total Monetary \$ 1,235.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 911.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 911.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,235.00

(10) TOTAL Monetary Expenditures To Date

\$ 911.00

(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.

(Type name) Bobby McGahee
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Bobby McGahee
Signature

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

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

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Andre D. Joyce (2) I.D. Number 158

(3) Cover Period 8 / 18 / 10 through 9 / 16 / 10 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
8 / 18 / 10 1	Andre D. Joyce 1526 N.W. 58 Terr. Miami, FL 33142	I	Mental Health Prac. titioner	CAS			500.00
8 / 18 / 10 2	Pamela J. Jefferson 2990 N.W. 67 St. Miami, FL 33147	I	Nurse	CAS			150.00
8 / 20 / 10 3	Andre D. Joyce 1526 N.W. 58 Terr. Miami, FL 33142	I	Mental Health Prac. titione r	CAS			150.00
9 / 16 / 10 4	J.D. Shingles 11101 S.W. 200 St. Apt. #104 Miami, FL 33157	I	Con- sultant	CAS			10.00
9 / 16 / 10 5	Andre D. Joyce 1526 N.W. 58 Terr. Miami, FL 33142	I	Mental Health Prac. titione r	CAS			350.00
9 / 16 / 10 6	Bobby McGahee 6340 S.W. 58 Ave. Miami, FL 33143	I	Retired	CAS			75.00
/ /							
/ /							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Andre D. Joyce

(2) I.D. Number 158

(3) Cover Period 8 / 18 / 10 through 9 / 16 / 10

(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					
8 / 20 / 10	Office of City Clerk City of Miami 3500 Pan American Dr. Miami, FL 33133	Campaign filing fee	MON		\$682.00
200					
8 / 29 / 10	Harland Clarke 6013 N.W. Seventh Avenue Miami, FL 33127	Campaign checks	MON		\$29.00
1001					
8 / 30 / 10	Tosiba Mitchell Leaman Building, 2nd Floor 15800 N.W. 42 Ave. Miami, FL 33054	Web design services	MON		\$200.00
1001					
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Mr. Bobby McGahee
 6340 SW 58th Ave
 Miami FL 33143

Office of City Clerk
 City of Miami
 3500 Pan American Ave.
 Miami, FL 33133

33133

Postage
 and
 profits
 paid
 at
 Miami
 Florida
 33133

