

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

(1) MEL P JOHNSON
Name

(2) 395-3 GLEN WAY
Address (number and street)

Miami Springs, FLA 33166
City, State, Zip Code

OFFICE USE ONLY

CITY OF MIAMI SPRINGS
2011 MAR 18 P 12:44

(3) ID Number: _____

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):

Candidate (office sought): Council, Group 3

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 2 / 26 / 2011 To 3 / 11 / 2011 Report Type G3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ 500.00

Total Monetary \$ 1525.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0

Transfers to Office Account \$ _____

Total Monetary \$ 885.00

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 2025.00

(10) TOTAL Monetary Expenditures To Date

\$ 885.00

(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) Mel JOHNSON

Individual (only for electioneering Commun.) Treasurer Deputy Treasurer

Mel Johnson
Signature

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

(Type name) Mel JOHNSON

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

Mel Johnson
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name MEL R JOHNSON (2) I.D. Number _____

(3) Cover Period 2/26/2011 through 3/11/2011 (4) Page 2 of 3

(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
2/28/2011	MEL JOHNSON 395-3 GLEN WAY MIAMI SPRINGS, FL 33166	LOA	Psychologist	LOA			\$00.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Mei JOHNSON (2) I.D. Number _____

(3) Cover Period 2/26/2011 through 3/11/2011 (4) Page 3 of 3

(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					
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