

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Pamela Beasley- Pittman

Name

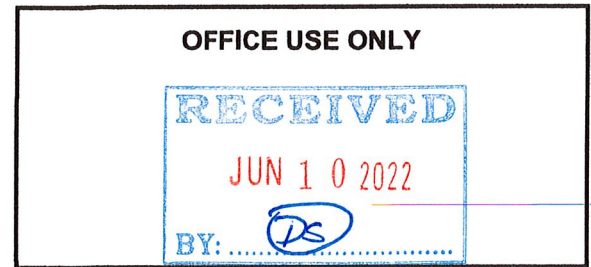
(2) 500 NW 19th Avenue

Address (number and street)

Fort Lauderdale, FL 33311

City, State, Zip Code

Check here if address has changed



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

(4) Check appropriate box(es):

Candidate Office Sought: Fort Lauderdale Commission District 3

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 05 / 01 2022 To 05 / 31 2022 Report Type: M5

Original

Amendment

Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 00

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 100 . 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 00 . 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) Mary A. Lee

Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

**X** Mary A. Lee  
Signature

(Type name) Pamela Beasley-Pittman

Candidate  Chairperson (only for PC and PTY)

**X** [Signature]  
Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name PAMELA S. BEASLEY-PITTMAN (2) I.D. Number \_\_\_\_\_

(3) Cover Period 05 / 01 / 2022 through 05 / 31 / 2022 (4) Page 01 of 01

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
05 / 31 / 2022	PAMELA S. Beasley-Pittman 500 NW 19 AVE Fort Lauderdale, Fl 33311	S	RETIRED	CHE	N/A	N/A	100.00
01							
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