			CAN	1PAI	GN	TR	EAS	URE	R'S F	REP	OR	T S	UM	MARY
(1)	Maxwell B. C	Chambe	ers										OF	FFICE USE ONLY
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(2)	8453 Southa									-			וטן –	10/10/24 - 10:03 PM
	Address (r		r and s	street)									$L^{00}$	By City Clerk
	Miramar, FL City, State		ode.							-				
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	Candida Political Election Party Ex Indepenindividual m	Comm eering ecutive dent Ex	ittee (F Comm Comr cpendit	unication mittee ( ture (IE	ons C (PTY)	Org. (	ECO)	n	☐ Che	ck he	ere if	PTY	has	CO has disbanded disbanded IE or EC reports will be filed
							(5) F	Repor	t Identi	fiers	5			
Cove	er Period:	From	07	/	01	/	24	То	09	/	30	/	24	Report Type: Q-3
<b>Ø</b> 0	riginal		Ame	ndmen	nt	_		☐ Sp	ecial Ele	ection	n Rep	ort		
(6)	Contribut	ions T	his R	eport					(7)	Ex	pen	ditu	res T	his Report
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									(8)	<b>O</b> 1	ther			tions ,000
(9)	TOTAL M	onetar				То	Date		(10)	TC	IATC	_ Mc		ary Expenditures To Date
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	Individual (only electioneering o		<b>☑</b> Tre	easurer		Depu	ty Treat	100		Candi	date			☐ Chairperson (only for PC and PTY)
X							11	4BCE 10/24	B-BFF5 - 10: <b>8</b> 3					
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(1) Name	axwell B. Cl	nambers					(2) I	D. Number			
(3) Cover Per	07	/	/	through	09	/	/	(4) Page	2	_ of _	16

(5)	(=)		(0)	(0)	(10)	(44)	(40)
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
07, 17, 24	Weeks Fowell FLLC		Law Firm	Check			<b>\$4.000.00</b>
1	401 NW 7th Avenue Fort Lauderdale, FL 33311	Business					\$1,000.00
07, 17, 24	Coastline Title Company		Title	Check			
2	5975 N Federal Hwy APT 123 Fort Lauderdale, FL 33308	Business	Compan y				\$1,000.00
07, 17, 24	Right Perspective Development Group, LLC		Develop	Check			
3	401 NW 7th Avenue Fort Lauderdale, FL 33311	Business	ment Agency				\$1,000.00
07,02,24	Michelle Austin Paimes		Attorney	Check			
4	19355 Turnberry Way, Apt 17K Miami, FL 33158	Individual					\$1,000.00
07,02,24	Michael F. Coles		Healthca	Check			
5	10045 SW 77th Court Miami, FL 33156	Individual	re				\$1,000.00
07, 17, 24	Right Consulting LLC		Law Firm	Check			
6	40-1 NW 7th Ave Fort Lauderdale, FL 33311	Business					\$1,000.00
07,02,24	Law Office of Norman C. Powell		Law Firm	Check			
7	1666 John F Kennedy Causeway #420 North Bay Village, FL 33141	Business					\$1,000.00

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(1) Name	Maxwel	I B. Cha	mbers			(2) I.D. Number									
(3) Cover I	Pariod	07	, 01	, 24	through	09	, 30	,	24	(4) Page	3	of	16		

	(F)		<b>/7</b> \		(0)	(0)	(40)	(11)	(42)
	(5) Date		(7) Full Name		(8)	(9)	(10)	(11)	(12)
	(6)		(Last, Suffix, First, Middle)						
5	Sequence	е	Street Address &	C	ontributor	Contribution	In-kind		
	Number		City, State, Zip Code	Туре	Occupation	Type	Description	Amendment	Amount
07	02	,24	Norman C. Powell		Attorney	Check			
8			320 Grand Concourse Miami Shores, FL 33138	Individual					\$1,000.00
07	03	,24	Ericq P. Pierre		Attorney	Check			
9			19355 Turnberry Way, Unit 17K Aventura, FL 33180	Individual					\$1,000.00
07	17	,24	Burnadette Norris- Weeks PA		Law Firm	Check			
10			401 NW 7th Ave Fort Lauderdale, FL 33311	Business					\$1,000.00
08	15	,24	BGE Strategies, Incorporated		Strategis	Check			
11			9830 Dunhill Drive Miramar, FL 33025	Business	L				\$1,000.00
08	15	,24	Jamila H. English		Educator	Check			
12			3830 SW 26th Street West Park, FL 33023	Individual					\$1,000.00
08	15	,24	James D. McQueen		Former	Check			
13			9830 Dunhill Drive Miramar, FL 33025	Individual	Attorney				\$1,000.00
08	13	,24	Lex De Leon		Consulta nt	Check			
14			4405 W 12 Lane, # 1D Hialeah, FL 33012	Individual	IIL				\$1,000.00

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(1) Name _	Maxwell	B. Cha	ambers						(2) I	.D. Number			
(3) Cover Pe	eriod _	07	/	/ 24	through	09	/_3	30 /	24	(4) Page	4	_ of _	16

(5) Date	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08, 15, 24	Annette E. Lewis		Retiree	Check			
15	821 Tanglewood Circle Weston, FL 33327	Individual					\$1,000.00
08, 12, 24	Modis Architects, LLC		Architect	Check			
16	4955 SW 75th Ave Miami, FL 33155	Business	S				\$1,000.00
08, 13, 24	Artifex Construction Corporation		Construc tion Co.	Check			
17	4913 SW 75th Avenue Miami, FL 33155	Business	tion co.				\$1,000.00
08,20,24	Tanae English		Program	MoneyOr			
18	3830 SW 26th Street West Park, FL 33023	Individual	Aide	der			\$1,000.00
08,20,24	Alben Duffie		Business	•			
19	5773 Brookfield Circle East Ft. Lauderdale, FL 33312	Individual	Owner	der			\$1,000.00
08, 15, 24	BH3 IG DEVELOPER LLC		Develop	Check			
20	819 NBE 2 AVE STE 500 FT LAUDERDALE, FL 33304	Business	ers				\$1,000.00
08,20,24	BH3 Management LLC		Real	Check			
21	21500 Biscayne Blvd. Suite 302 Aventura, FL 33180	Dusiness	Estate Investme nt				\$1,000.00

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(1) Name	Maxwell	B. Cha	ambers				(2)					
(3) Cover Po	eriod	07	, 01	, 24	through	09	, 30	, 24	(4) Page	5	of	16

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence	Full Name (Last, Suffix, First, Middle) Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
08,20,24	BH3 Assest Managment, LLC		Real Estate	Check			<b>#4</b> 000 00
22	21500 Biscayne Blvd. Suite 302 Aventura, FL 33180	Business	Investme nt				\$1,000.00
08, 20, 24	BH3 NY, LLC		Real	Check			
23	21500 Biscayne Blvd. Suite 302 Aventura, FL 33180	Business	Estate Investme nt				\$1,000.00
08, 14, 24	Anthony Brunson P.A.		Certified Public	Check			
24	3350 SW 148th Ave Suite 110 Miramar, FL 33027	Business	Accounti ng				\$1,000.00
08, 20, 24	Prive Development, LLC		Real Estate	Check			
25	819 NE 2nd Avenue, Suite 500 Fort Lauderdale, FL 33304	Business	Investme nt				\$1,000.00
08, 14, 24	N & H Consulting, Inc.		Consulti	Check			
26	9500 NW 12TH ST. BAY 1 Miami, FL 33172	Business	ng Flrm				\$1,000.00
08, 15, 24	H.A. Contracting Corp		Contracti	Check			
27	Doral, FL 33172		ng & Managm ent Co.				\$1,000.00
08,07,24	Jorge & Awilda Lopez		Self employed	Check			
28	461 Arvida Parkway Coral Gables, FL 33156	Individual	/Business owners				\$1,000.00

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(3) Cover I	Pariod	07	, 01	, 24	through	09	, 30	,	24	(4) Page	6	of	16		

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08, 15, 24 29	B & B Professional Consultants, Inc. 3840 SW 26th Street West Park, FL 33023	Business	Consulta nt Firm	Check			\$1,000.00
08, 15, 24 30	Clean Ice, LLC 6933 Miramar Parkway Miramar, FL 33023	Business	lce Machine Cleaner	Check			\$1,000.00
08, 15, 24 31	Barbara Ann Hardemon 3840 SW 25th Street West Parl, FL 33023	Individual	Business Owner	Check			\$1,000.00
08, 15, 24 32	Gelin Benefis Group 6750 N Andrews Ave Suite 200 Fort Lauderdale, FL 33309	Business	Health Insurance Advisory, Consulting and Brokerage Service	Check			\$1,000.00
08, 15, 24 33	Teja & A Associates Inc. 5773 Brookfield Circle East Fort Lauderdale, FL 33312	Business	Develop ment Firm	Check			\$1,000.00
08, 15, 24	AJT Expert Solutions LLC 3830 SW 26 ST West Park, FL 33023		Consulta nt Firm	Check			\$1,000.00
08, 13, 24 35	1801 NW 186 Street Miami Gardens, FL 33056		Construc tion and Design Firm		S AND CODE VAI	UES	\$1,000.00
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(1) Name	Maxwell	B. Cha	ambers						(2)	I.D. Number				
(3) Cover P	oriod	07	, 01	, 24	through	09	, 30	) ,	24	(4) Page	7	of	16	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08, 15, 24	Billy Hardemon		Business				
36	3840 SW 26th Street West Park, FL 33023	Individual	Owner				\$1,000.00
08, 15, 24	Zakiya Kelley		Assistant	Check			
37	3840 SW 26th Street Miramar, FL 33023	Individual	Director				\$1,000.00
08, 15, 24	Epic Events Entertainment LLC		Event Planning &	Check			
38	1840 SW 26th Street West Park, FL 33023	Business	Entertainm ent Firm				\$1,000.00
08, 15, 24	Carlos Rolle		Professi	Check			
39	1801 NW 186 Street Miami Gardens, FL 33056	maividuai	onal Engineer				\$1,000.00
08, 15, 24	Ashley C English		Business	Check			
40	3830 SW 26th Street West Park, FL 33023	Individual	Owner				\$1,000.00
08, 13, 24	Shaun M Davis		CPA	Check			
41	1587 Island Way Weston, FL 33326	Individual					\$1,000.00
08, 15, 24	Gold Coast Bench, Inc		Advertisi	Check			
42	3941 SW 47 AVENUE Davie, FL 33314	Business	ng Firm				\$1,000.00

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(1) Name	Maxwell	B. Cha	ambers					_ (2	2) I.D. Number				_
(3) Cover Po	ariod	07	, 01	, 24	through	09	, 30	, 24	(4) Page	8	of	16	

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08,20,24			Engineer	_	•		
43	6601 S.W. 80th Street STE 109 Miami, FL 33143	Business	Firm				\$500.00
08,20,24	Shanell Jones		Store	MoneyOr			
44	16211 SW 16th Street Pembroke Pines, FL 33027	Individual	Manager	der			\$500.00
08,20,24	Christine Young		Family	MoneyOr			
45	20871 Johnson Street Pembroke Pines, FL 33027	Individual	Counsel or	der			\$500.00
08, 20, 24	Kody Cruz		Occupati	•			
46	13763 NW 20th Street Pembroke Pines, FL 33028	Individual	onal Theraphi st	der			\$500.00
08,20,24	Marie Soto			MoneyOr			
47	3551 SW 49th Street Hollywood, FL 33312	Individual	е	der			\$500.00
08,20,24	Fay Grant		Retiree	MoneyOr			
48	15040 Tetherclift St Davie, FL 33331	Individual		der			\$500.00
08,20,24	lan Maragh	Airport		MoneyOr			
49	2117 SW 151 st Ave Miramar, FL 33027	Individual	Technici an	der			\$500.00

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(1) Name	Maxwe	II B. Cr	nambers						_	(2)	I.D. Number _			
(3) Cover F	eriod	07	/ 01	/	through	09	_ / _	30	_ / _	24	(4) Page	9	of _	16

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
	Delta Anderson		Nurse	MoneyOr			
50	2176 Dock Drive West Fargo, ND 58078	Individual	Praction er	der			\$1,000.00
08,20,24	Leedel Cox		Business	,			
51	1471 SW 30 Avenue Deerfield Beach, FL 33442	Individual	Owner	der			\$500.00
08,20,24	Delar Taliaferro		Store	MoneyOr			
53	4770 Colonial Blvd Fort Myers, FL 33966	Individual	Manager	der			\$600.00
08, 20, 24	Willie Junes		Police	MoneyOr			
54	6940 SW 1st Court Pembroke Pines, FL 33023	Individual	Officer	der			\$500.00
08, 20, 24	Briana Cherelus		Nurse	MoneyOr			
55	14630 SW 33 Court Miramar, FL 33027	Individual		der			\$1,000.00
08, 14, 24	Judith Stern Consulting, Inc.		Consulti	Check			
56		Business	ng Firm				\$500.00
08, 12, 24	We Care Family Clinic		Healthca	Check			
57	8430 W Broward Blvd #200 Plantation, FL 33324	business	re Business				\$500.00

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(1) Name	Maxwel	I B. Cha	mbers					_ (2	2) I.D. Number				_
(3) Cover P	eriod	07	, 01	, 24	through	09	, 30	, 24	(4) Page	10	of	16	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08, 13, 24 58	Maceda Contractors, LLC 2800 Glades Circle, Suite 125 Weston, FL 33327	Business	General Contract ors	Check			\$500.00
08, 12, 24 59	Grace Funeral Home, Inc. 770 NW. 119th St. Miami, FL 33168	Business	Funeral Home	Check			\$500.00
08,20,24	Daphne Britton  15890 NW 10 Street Pembroke Pines, FL 33028	Individual	Teacher	MoneyOr der			\$400.00
61	Ashley Williams 2511 SW 82 Ave Miramar, FL 33025	Individual	Student	MoneyOr der			\$250.00
08, 20, 24	Emmanuel Touze 1896 SW 163 Avenue Miramar, FL 33027	Individual	Teacher	MoneyOr der			\$250.00
08, 22, 24 63	Waste Management Inc of Florida 2700 Wiles Road Coconut Creek, FL 33073	Business	Waste Manage ment Company	Check			\$1,000.00
08, 22, 24 64 DS-DE 13 (Rev. 11/2	Equity Land Title LLC  525 Okeechobee Blvd., Suite 900 West Palm Beach, FL 33401	Business	Real Estate Compan y	Check	AND CODE VAL	IIES	\$500.00
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(1) Name	Maxwell	IB. Ch	ambers					(2)	I.D. Number				_
(3) Cover Po	eriod	07	, 01	24	through	09	, 30	, 24	(4) Page	11	of	16	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08,22,24	Greenspoon Marder LLP		Law Firm				
65	100 W Cypress Creek Rd # 700 Fort Lauderdale, FL 33309	Business					\$500.00
08,22,24	Okeechobee Landfill,		Landfill	Check			
66	2700 NW 48th Street Pompano Beach, FL 33073	Business	company				\$500.00
08, 20, 24	Catherine Drare			MoneyOr			
67	3346 SW 173rd Way Miramar, FL 33029	Individual	Instructo r	der			\$250.00
08, 16, 24	Vincent T. Brown		Attorney	Check			
68	847 NW 119th Street, Ste 202 Miami, FL 33168	Individual					\$250.00
08, 15, 24	Heidi Richards		Strategis	Check			
69	8890 SW 15th Court Pembroke Pines, FL 33025	Individual	L				\$250.00
08, 15, 24	Charlotte Barnes Green		Adminstr	Check			
70	2298 NW 60th Street, Ph 638-5316 Miami, FL 33142	Individual	alUI				\$200.00
08, 18, 24	Lorraine Dawkins		Business	Check			
71	16487 SW 30th Street Miramar, FL 33027	Individual	Owner				\$200.00

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(1) Name	Maxwel	B. Cha	ambers						(2)	I.D. Number				_
(3) Cover Po	ariod	07	, 01	, 24	through	09	, 30	/	24	(4) Page	12	of	16	

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08, 15, 24	National Fire Consulting & Training, Inc.		Training & Consultin	Check			
72	4613 N. UNIVERSITY DRIVE #122 Coral Springs, FL 33065	Business	g Company				\$150.00
08, 15, 24	SCM Planning Corporation		Planning Flrm	Check			
73	3960 S.W. 146TH AVENUE Miramar, FL 33027	Business					\$150.00
08, 15, 24	Joy Beverly Smith		Official	Check			
74	P.O. Box 770336 Coral Springs, FL 33077	Individual					\$150.00
09, 15, 24	Marcia Thomas			MoneyOr			
76	1831 SW 119th Avenue Miramar, FL 33025	Individual		der			\$100.00
08, 15, 24	Michael L Morning, Jr.			Check			
77	5721 Wiley Street Hollywood, FL 33023	Individual					\$100.00
08,22,24	Randy Grant		Retiree	MoneyOr			
78	15040 Tetherclift St Davie, FL 33331	Individual		der			\$500.00
08, 15, 24	Delrish Moss		Police	MoneyOr			
78	11765 City Hall Promenade Miramar, FL 33025	Individual	Officer	der			\$500.00

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(1) Name	Maxwell	B. Cha	ambers					(2)	I.D. Number				_
(3) Cover Po	eriod	07	, 01	, 24	through	09	, 30	, 24	(4) Page	13	of	16	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08, 15, 24	Terrin English		Program	MoneyOr			
79	3830 SW 26th Street West Park, FL 33025	Individual	Aide	der			\$1,000.00
08, 15, 24	Ann McSwain		Chief	OtherRe			
80	2409 Main Street, Unit 305 Miramar, FL 33025	Other	Operatin g Officer	ceipts			\$200.00
08, 15, 24	Cleveland Smith		Business	OtherRe			
81	4061 SW 20th Street West Park, FL 33023	Individual	Owner	ceipts			\$550.00
08, 15, 24	Bruce Knight		Operatio	OtherRe			
82	16700 Stratford Ct South West Ranches, FL 33331	Individual	ns	ceipts			\$1,000.00
08, 15, 24	Torey Alston		School	OtherRe			
83	4800 W Leitner Drive Coral Springs, FL 33067	Individual	Board Member	ceipts			\$150.00
08, 15, 24	Glenn Rice		Retired	OtherRe			
84	4605 Sw 152 Ave Miramar, FL 33027	Individual		ceipts			\$1,000.00
08, 15, 24	Trudie Chin			CashOr			
84	13113 SW 42nd Street Miramar, FL 33027	Individual		Cashiers Check			\$50.00

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Maxwell B. Chambers

(1) Name				(2)	I.D. Number		
(3) Cover Period	I / 1 / 24	throu	gh /	30 / 24	_ (4) Page		of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
08, 15, 24	Tahneia Berry			CashOr			
85	4475 SW 174th Ave Miramar, FL 33029	Individual		Cashiers Check			\$50.00
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# **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Maxwell B. Chambers			(2) I.D. Nur	nber								
(3) Cover Period	07	, 01	, 24	through	09	, 30	, 24	(4) Page	15	of	16	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
08 /07 /24	Sunbiz.org (Divisons of Corporation)  The Centre of Tallahassee 2415 N.		CandidateEx pense		\$125.00
08 /12 /24	Monroe Street, Suite 810 T Your Mind My Design  9740 SW 12 Street Pembroke Pines, FL 33025		CandidateEx pense		\$300.00
08 /13 /24	Dollar Tree 5810 S University Drive Davie , FL 33328		CandidateEx pense		\$80.25
08 /13 /24	Walmart  4301 S University Drive Davie, FL 33328		CandidateEx pense		\$74.87
08 /14 /24 5	Trader's Joe 2296 S University Drive Davie, FL 33324		CandidateEx pense		\$25.64
08 /13 /24 6	Springhill Suites (Meeting Room)  10880 Marks Way, Miramar, FL 33025 Miramar, FL 33025		CandidateEx pense		\$321.00
08 /19/24 7	Your Mind My Design  9740 SW 12 Street Pembroke Pines, FL 33025		CandidateEx pense		\$250.00
08 /19 / 24 8	M4 Media Enterprises, LLC  17645 NW 18th Ave Miami Gardens Miami Gardens, FL 33056		CandidateEx pense		\$250.00

# **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Maxwell B. Chambers	(2) I.D. Number		
(3) Cover Period 07 / 01 / 24	through 09 / 30 / 24	(4) Page 16 of	16

	(5)	(7)	(8)	(9)	(10)	(11)
	(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
80	/19 /24	Danielle Jaggon (Event Servers and Table Cloth Rental)		CandidateEx pense		\$350.00
9		9115 SW 36th Manor Miramar, FL 33025				φοσο.σσ
09	/16 /24	Blue Table Strategies, LLC		CandidateEx pense		
10	, ,	1700 NORTH MONROE STREET SUITE 11-243 Tallahasse, FL 32303				\$500.00
08	/15 /24	Anedot (Online giving processor)		CandidateEx pense		¢447.50
11	,	1340 Poydras St #1770 New Orleans, LA 70112				\$117.50
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	Instructions for Campaign Treasurer's Report Summary
(1)	<b>Name:</b> full name of the candidate, political committee, party executive committee, electioneering communications organization, or individual making an independent expenditure or electioneering communication.
(2)	Address: the full address or post office box, city, state, and zip code.  ☐ Check the box if the address has changed since the last report filed.
(3)	ID Number: identification number assigned by the filing officer.
(4)	Check the appropriate box(es).
(5)	Report Identifiers  Cover Period: the dates this report covers (i.e., From 1/1/15 To 1/31/55). Important: use the appropriate cover period dates as published by the filing officer.  Report Type: refer to the filing officer's calendar of reporting dates for the correct codes to be used for each reporting period. If report is for a special election add "S" in front of the report code (i.e., SG3).  Check one of the appropriate boxes:  Original: first report filed for this reporting period.
	<ul> <li>Amendment: must summarize only contributions/fund transfers and expenditures/distributions being reported as additions or deletions. Read instructions for sequence numbers and amendment types on the back of Forms DS-DE 13A and 14A.</li> <li>Special Election Report: <a href="Important">Important</a>: once a special election report is filed, the entity is required to file all remaining reports due for the special election.</li> </ul>
(6)	Contributions This Report:
	Cash and Checks: total amount for this reporting period.  Loans: total amount for this reporting period.  Total Monetary: sum of Cash and Checks and Loans.  In-Kind: the fair market value of the in-kind contribution at the time it is given for this reporting period.
(7)	Expenditures This Report:
	Monetary Expenditures: total amount of monetary expenditures for this reporting period.  Transfers to Office Account: total amount transferred to an office account by <u>elected</u> candidates only.  Total Monetary: sum of Monetary Expenditures and Transfers to Office Account.
(8)	<b>Other Distributions:</b> the total amount of goods and services contributed to a candidate or other committee by a PC, ECO, or PTY.
(9)	<b>TOTAL Monetary Contributions To Date:</b> the amount of total monetary contributions to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
(10)	<b>TOTAL Monetary Expenditures To Date:</b> the amount of total monetary expenditures to date. Candidates keep cumulative totals from the time the campaign depository is opened through the termination report.
(11)	Type or print the required officer's name and have them sign the report:  Candidate report: treasurer and candidate must sign.  PC report: treasurer and chairperson must sign.  PTY report: treasurer and chairperson must sign.  ECO report: organization's treasurer must sign.  IE or EC report: individual must sign (this applies when an individual acts alone to make these expenditures)
	AMENDMENT REPORTS: An amendment report summary should summarize only contributions, expenditures, distributions, & fund transfers being reported as additions or deletions. Read the instructions for the sequence number & amendment type fields on the back of forms DS-DE 13, 14, 14A and 94.

#### INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

- (1) Candidate's full name or name of the political committee (PC), electioneering communications organizations (ECO) or party executive committee (PTY).
- (2) The identification number assigned by the filing officer.
- (3) Cover period dates (e.g., <u>1/1/15</u> through <u>1/31/15</u>). (See filing officer's reporting dates calendar for appropriate year and cover periods.)
- (4) Page numbers (e.g., <u>1</u> of <u>3</u>).
- (5) Date contribution was RECEIVED (Month/Day/Year).
- (6) **Sequence Number** Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting amendments.

  For example, a M1 report having 75 contributions would use sequence numbers 1 through 75. The next report (M2), comprised of 40 contributions would use sequence numbers 1 through 40. Contributions on amended M1 reports would begin with sequence number 76 and on amended M2 reports would begin with sequence number 41. See the *Amendment Type* instructions below.
- (7) Type full name and address of contributor (including city, state and zip code).
- (8) Enter the type of contributor using one of the following codes: Occupation of contributor for contributions over \$100 only. (If a business, please indicate nature of business.)

I	Individual	
В	Business	(also includes corporations, organizations, groups, etc.)
Е	Electioneering Communications Organizations	
F	Political Committee	(federal or state)
Р	Political Parties	(includes federal, state and county executive committees)
0	Other	(e.g., candidate surplus funds to party, etc.)
S	Candidate to Self	

(9) Enter Contribution Type using one of the following codes:

NOTE: Cash includes cash and cashier's checks.

Code	Description
CAS	Cash or Cashier's Check
CHE	Check
COF	Carryover Funds from Previous Campaign
INK	In-Kind
INT	Interest
LOA	Loan
MO	Money Order
MUC	Multiple Uniform Contributions
RCT	Other Receipts
REF	Refund (Negative Amount Only)

- (10) Type the description of any in-kind contribution received.
  Candidate's Only If in-kind contribution is from a party executive committee and is allocable toward the contribution limits, type an "A" in this box. If contribution is not allocable, type an "N".
- (11) **Amendment Type** (required on amended reports) To add a new (previously unreported) contribution for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for contributions with amendment type "ADD" will start at one plus the number of contributions in the original report. For example, amending an original M1 report that had 75 contributions means the sequence number of the first contribution having amendment type "ADD" will be 76; the second "ADD" contribution would be 77, etc. When amending an original M2 report that had 40 contributions, the sixth "ADD" contribution would have sequence number 46.

To correct a previously submitted contribution use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the contribution to be corrected. In combination with the report number being amended, this sequence number will identify the contribution to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assign the sequence number as described above.

(12) Type amount of contribution received. Political Committees ONLY: Multiple uniform contributions from the same person, aggregating NMT \$250 per calendar year, collected by an organization that is the affiliated sponsor of a PC, may be reported by the PC in an aggregate amount listing the number of contributors together with the amount contributed by each and the total amount contributed during the reporting period. The identity of each person making such uniform contribution must be reported to the filing officer by July 1 of each calendar year, or, in a general election year, NLT the 60th day immediately preceding the primary election.

#### INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

- (1) Type candidate's full name or name of the political committee (PC), electioneering communications organization (ECO), or party executive committee (PTY).
- (2) Type identification number assigned by the filing officer.
- (3) Type cover period dates (e.g., <u>1/1/15</u> through 1/31/15). (See filing officer's reporting dates calendar for appropriate cover periods.)
- (4) Type page numbers (e.g.,  $\underline{1}$  of  $\underline{3}$ ).
- (5) Type date of fund transfer (Month/Day/Year).
- (6) Sequence Number Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting amendments.

For example, a M1 report having 2 fund transfers would use sequence numbers 1 thru 2. The next report (M2), comprised of 4 fund transfers would use sequence numbers 1 thru 4. Fund transfers on amended M1 reports would begin with sequence number 3 and on amended M2 reports would begin with sequence number 5. See the Amendment Type instructions below.

- (7) Type full name and address of financial institution (including city, state and zip code).
- (8) Enter Transfer Type using one of the following codes:

DESCRIPTION	CODE
Transfer FROM identified account to campaign account Transfer TO identified account from the campaign account	F T

- (9) Nature of Account (e.g., certificate of deposit, money market, etc...)
- (10) **Amendment Type** (required on amended reports) To add a new (previously unreported) fund transfer for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for fund transfers with amendment type "ADD" will start at one plus the number of fund transfers in the original report. For example, amending an original M1 report that had 75 fund transfers, means the sequence number of the first fund transfer having amendment type "ADD" will be 76; the second "ADD" fund transfer would be 77, etc. When amending an original M2 report that had 40 fund transfers, the sixth "ADD" fund transfer would have sequence number 46.

To correct a previously submitted fund transfer use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the fund transfer to be corrected. In combination with the report number being amended, this sequence number will identify the fund transfer to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assign the sequence number as described above.

(11) Type amount of fund transfer.

#### INSTRUCTIONS FOR CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

- (1) Candidate's full name or name of the political committee (PC), electioneering communications organization (ECO), or party executive committee (PTY).
- (2) Identification number assigned by the filing officer.
- (3) Cover period dates (01/01/15 through 01/31/15). (See filing officer's reporting dates calendar for appropriate cover periods.)
- (4) Page numbers (e.g., <u>1</u> of <u>3</u>).
- (5) Date of expenditure (Month/Day/Year).
- (6) Sequence Number Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting requirements.

For example, a M1 report having 40 expenditures would use sequence numbers 1 through 40. The next report (M2), comprised of 30 expenditures would use sequence numbers 1 through 30. Expenditures on amended M1 reports would begin with sequence number 41 and on amended M2 reports would begin with sequence number 31. See *Amendment Type* instructions below.

- (7) Full name and address of entity receiving payment (including city, state and zip code).
- (8) Purpose of expenditure (if expenditure is a contribution to a candidate, also type the office sought by the candidate).

  PLEASE NOTE: This column does not apply to candidate expenditures, as candidates cannot contribute to other candidates from campaign funds. However, PCs (supporting candidates) and party executive committees contributing to candidates must report office sought (Section 106.07, F.S.).
- (9) Enter Expenditure Type using one of the following codes:

Code	Description
CAN	Candidate Expense
DIS	Disposition of Funds
DFC	Disposition of Funds to Future Campaign (effective 11/1/13)
DPP	Disposition of Funds to Political Party (effective 11/1/13)
DPV	Disposition of Funds to Petition Verification (effective 11/1/13)
ECC	Electioneering Communication
IEC	Independent Expenditure Regarding a Candidate
IEI	Independent Expenditure Regarding an Issue
MON	Monetary (Not to a Candidate)
PCW	Petty Cash Withdrawn
PCS	Petty Cash Spent
PPD	Pre-paid Distribution
REF	Refund (Negative Amount Only)
RMB	Reimbursements
TOA	Transfer to Office Account (Disposition of Funds)

(10) **Amendment Type** (required on amended reports) - To add a new (previously unreported) expenditure for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for expenditures with amendment type "ADD" will start at one plus the number of expenditures in the original report. For example, amending an original M1 reports that had 75 expenditures, means the sequence number of the first expenditure having amendment type "ADD" will be 76; the second "ADD" expenditure would have sequence number 39.

To correct a previously submitted expenditure use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the expenditure to be corrected. In combination with the report number being amended, this sequence number will identify the expenditure to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assign the sequence number as described above.

(11) Amount of expenditure.

THIS FORM IS USED TO REPORT DISTRIBUTIONS OF GOODS OR SERVICES CONTRIBUTED TO A CANDIDATE OR COMMITTEE, INDIRECT EXPENDITURES AND REIMBURSEMENTS.

- (1) Name of the entity.
- (2) Identification number assigned by the filing officer.
- (3) Cover period dates (e.g., <u>03/01/14</u> through <u>03/31/14</u>). (See the filing officer's reporting dates calendar for appropriate cover periods.)
- (4) Page numbers (e.g.,  $\underline{1}$  of  $\underline{3}$ ).
- (5) Date of distribution (Month/Day/Year).
- (6) Sequence Number Each detail line shall have a sequence number assigned to it. Sequence numbers are to be assigned within each reporting period and for each type of detail line. Thus the report type, detail line type, and sequence number will combine to uniquely identify a specific contribution, expenditure, distribution or fund transfer. This method of unique identification is required for responding to requests from the filing officer and for reporting amendments.

For example, a M1 report having 40 distributions would use sequence numbers 1 through 40. The next report (M2), comprised of 30 distributions would use sequence numbers 1 through 30. Distributions on amended M1 reports would begin with sequence number 41 and on amended M2 reports would begin with sequence number 31. See *Amendment Type* instructions below.

- (7) Full name and address of entity receiving distribution (including city, state and zip code).
- (8) Purpose of distribution (if distribution is a contribution to a candidate, also type the office sought by the candidate).
- (9) For each distribution that is related to an itemized expenditure previously listed on Itemized Expenditures (Form DS-DE 14), enter the Year, Report Type and Sequence Number associated with the expenditure.

\*PARTY EXECUTIVE COMMITTEES ONLY - If distribution is allocable toward the contribution limits, type an "A" in this box. If distribution is nonallocable, type and "N".

(10) **Amendment Type** (required on amended reports) - To add a new (previously unreported) distribution for the reporting period being amended, enter "ADD" in amendment type on a line with ALL of the required data.

The sequence number for distributions with amendment type "ADD" will start at one plus the number of distributions in the original report. For example, amending and original M1 report that had 75 distributions, means the sequence number of the first distribution having amendment type "ADD" will be 76; the second "ADD" distribution would be 77, etc. When amending an original M2 report that had 30 distributions, the ninth "ADD" distribution would have sequence number 39.

To correct a previously submitted distribution use the following drop/add procedure. Enter "DEL" in amendment type on a line with the sequence number of the distribution to be corrected. In combination with the report number being amended, this sequence number will identify the distribution to be dropped from your active records. On the next line enter "ADD" in amendment type and ALL of the required data with the necessary corrections thus replacing the dropped data. Assigns the sequence number as described above.

#### (11) Amount of distribution.

(12) Distribution Type

Code	Description
PPD	Pre-paid Distribution
RMB	Reimbursements
CCP	Credit Card Purchase
INK	In-Kind Distribution