

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Linda Hill Anderson
Name

(2) 2334 Farnquot Street
Address (number and street)

HOLLYWOOD, FL 33020
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: DISTRICT 2 CITY OF HOLLYWOOD

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 02/01/20 To 02/29/20 Report Type: 2020MD2

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 620 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 620 . 00

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 17 . 00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 17 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 10,599 . 10

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 3,013 . 11

(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) LAURIE SCHECTER

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

Laurie Schecter
Signature

(Type name) LINDA Hill ANDERSON

Candidate Chairperson (only for PC and PTY)

Linda Hill Anderson
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Linda Hill Anderson

(2) I.D. Number _____

(3) Cover Period 02/01/20 through 02/29/20

(4) Page _____ of _____

(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					
02/14/20 01	Wix. Com 1361 NW 94th Way Coral Springs, FL 33071	Monthly website charge	CAN		17 ⁰⁰
11					
11					
11					
11					
11					
11					
11					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Linda Hill Anderson (2) I.D. Number _____

(3) Cover Period 02 / 01 / 20 through 02 / 29 / 20 (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
02 / 11 / 20 01	Valmarie Rhodes 1985 S. Ocean Dr. Unit 5F Hallandale, FL 33009	I	Teacher	CAS			20 ⁰⁰
02 / 11 / 20 02	Ann Murray 611 N. 70th Ave Hollywood, FL 33024	I	School Board Member	CHE			100 ⁰⁰
2 / 12 / 20 03	Henry Graham 2525 Raleigh St. Hollywood, FL 33020	I	Exec. Director	CHE			500 ⁰⁰
1 / 1							
1 / 1							
1 / 1							
1 / 1							