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

RECEIVED

JUL 1 0 2018 (1) NAME: JERRY FADGEN FOR MAYOR (3) I.D. NUMBER: N/A CITY CLERK'S OFFICE (2) ADDRESS: 21 EAST ACRE DR., PLANTATION, FL 33317 (4) CHECK APPROPRIATE BOX(ES): XXX CANDIDATE (OFFICE SOUGHT): PLANTATION MAYOR POLITICAL COMMITTEE CHECK IF PC HAS DISBANDED COMMITTEE OF CONTINUING EXISTENCE CHECK IF CCE HAS DISBANDED PARTY EXECUTIVE COMMITTEE CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED **ELECTIONEERING COMMUNICATION** (5) REPORT IDENTIFIERS COVER PERIOD: 06-01-18 THROUGH 06-30-18 REPORT TYPE: XXX ORIGINAL AMENDMENT SPECIAL ELECTION INDEPENDENT ----- EXPENDITURE -- REPORT REPORT (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT CASH & CHECKS \$0.00 MONETARY EXPENDITURES \$6,000.00 LOANS \$6.000.00 TRANSFER TO OFFICE ACCOUNT \$0.00 TOTAL MONETARY \$6,000.00 **TOTAL MONETARY** \$6,000.00 IN-KIND \$0.00 (8) OTHER DISTRIBUTIONS (9) TOTAL MONETARY CONTRIBUTIONS TO DATE (10) TOTAL MONETARY EXPENDITURES TO DATE \$6,000.00 (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 I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND IT IS TRUE, CORRECT, AND COMPLETE. AND IT IS TRUE, CORRECT, AND COMPLETE. KRISTOFOR KILKELLY JERRY FADGEN NAME OF XXX TREASURER **DEPUTY** NAME OF CHAIRMAN --- TREASURER CANDIDATE -- (PC/PT ONLY) SIGNATURE **SIGNATURE**

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) NAME:	JERRY FADGEN FOR MAYOR		(2) I.D	. NUMBER: N	I/A	
(3) COVER P	PERIOD: 06-01-18 THROUGH	06-30-18		(4) PAGE:	1 OF 1	
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NO ACTIVITY FOR THIS PERIOD

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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) NAME:	JERRY FADGEN FOR MAYOR			(2) I.D. NUME	BER: N/A	
(3) COVER	PERIOD: 06-01-18 THROUGH (06-30-18		(4) PAGE: 1	OF 1	
						=======================================
(5) DATE/	(7)		(8)	(9) EXPEN-	(10)	(11)
(6) SEQ. NO.	NAME, ADDRESS, ZIP		PURPOSE	DITURE TYPE	AMEND- MENT	AMOUNT
06/07/2018 2	KATHLEEN FADGEN 7379 SW 9TH CT PLANTATION, FL 33317		RETURN OF CAMPAIGN LOAN	CHE		5,963.00

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

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(1) NAME: JERRY FADGEN FOR MAYOR (3) I.D. NUMBER: JUN 1 1 2018 21 EAST ACRE DR., PLANTATION, FL 33317 CITY CLERK'S OFFICE (4) CHECK APPROPRIATE BOX(ES): XXX CANDIDATE (OFFICE SOUGHT): PLANTATION MAYOR POLITICAL COMMITTEE CHECK IF PC HAS DISBANDED COMMITTEE OF CONTINUING EXISTENCE CHECK IF CCE HAS DISBANDED PARTY EXECUTIVE COMMITTEE CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED **ELECTIONEERING COMMUNICATION** (5) REPORT IDENTIFIERS COVER PERIOD: 05-01-18 THROUGH 05-31-18 REPORT TYPE: M₅ XXX ORIGINAL **AMENDMENT** SPECIAL ELECTION INDEPENDENT - REPORT - EXPENDITURE REPORT (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT **CASH & CHECKS** \$0.00 MONETARY EXPENDITURES \$37.00 LOANS TRANSFER TO OFFICE ACCOUNT \$6,000.00 \$0.00 **TOTAL MONETARY** \$6,000.00 TOTAL MONETARY \$37.00 IN-KIND \$0.00 (8) OTHER DISTRIBUTIONS \$0.00 (9) TOTAL MONETARY CONTRIBUTIONS TO DATE (10) TOTAL MONETARY EXPENDITURES TO DATE \$6,000.00 \$37.00 (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 I CERTIFY THAT I HAVE EXAMINED THIS REPORT AND IT IS TRUE, CORRECT, AND COMPLETE. AND IT IS TRUE, CORRECT, AND COMPLETE. KRISTOFOR KILKELLY JERRY FADGEN NAME OF XXX TREASURER DEPUTY NAME OF **CHAIRMAN** - TREASURER CANDIDATE XXX - (PC/PT ONLY) **SIGNATURE SIGNATURE** Treasurer signed 3 = half

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(3) COVER PERIOD: 05-01-18 THROUGH 05-31-18 (4) PAGE: 1 OF 1			
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(5) (7) (8) (9) (10) (11) (12) DATE/ TYPE/ CONTRI- IN-KIND		(11) (12)	the state plate and
(6) OCCUPATION BUTION DESCRIP- AMEND- SEQ. NO. NAME, ADDRESS, ZIP IF > \$100 TYPE TION MENT AMOUNT	OCCUPATION BUTION DESCRIP-	,	٧T

NO ACTIVITY FOR THIS PERIOD

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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) NAME: JERRY FADGEN FOR MAYOR		(2) I.D. NUMI	BER: N/A	
(3) COVER PERIOD: 05-01-18 THROUGH 05-31-18		(4) PAGE: 1	OF 1	
(5) (7) DATE/	(8)	(9) EXPEN-	(10)	(11)
(6) SEQ. NO. NAME, ADDRESS, ZIP	PURPOSE	DITURE TYPE	AMEND- MENT	AMOUNT
05/03/2018 BANK OF AMERICA 1 7001 W BROWARD BLVD PLANTATION, FL 33317	CAMPAIGN CHECKS	CHE		37.00

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

APR 2 0 2018

CITY CLERK'S OFFICE:

NOTE: This form must be on file with the qualifying officer before opening the campaign account. OFFICE USE O						
1. CHECK APPROPRIATE BOX(ES): Initial Filing of Form Re-filing to Change: Tr	reasurer/Deputy Depository Office Party					
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip					
JERRY FADGEN	21 EAST ACRE DRIVE					
4. Telaphone 5. E-mail address	DI ANTATIONI EL 20047 0040					
(954)584-9786 JERRYFAD@AOL.CC	PLANTATION, FL 33317-2640					
6. Office sought (include district, circuit, group number) 7. If a candidate for a nonpartisan office, check if						
PLANTATION MAYOR applicable: My intent is to run as a Write-In candidate.						
8. If a candidate for a <u>partisan</u> office, check block and fill	in name of party as applicable: My intent is to run as a					
Write-In No Party Affiliation Party candidate.						
g. I have appointed the following person to act as my	Campaign Treasurer Deputy Treasurer					
10. Name of Treasurer or Deputy Treasurer KRISTOFOR M . KILKELLY						
11. Mailing Address 12. Telephone						
21 EAST ACRE DRIVE 954 584-9786						
13. City 14. County 15. Sta	te 16. Zip Code 17. E-mail address 33317-2640 KRIS.KILKELLY@FADGEN-CPA.COM					
PLANTATION BROWARD FL						
18. I have designated the following bank as my						
19, Name of Bank	20. Address					
BANK OF AMERICA 21. C ty 22. County	7001 W BROWARD BLVD 23. State 24. Zip Code					
PLANTATION BROWARD	FL 33317-2640					
	FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND AND THAT THE FACTS STATED IN IT ARE TRUE.					
25. Date	26. Signature of Candidate					
04-20-2018	X Janey for g -					
27. Treasurer's Acceptance of Appointment	(fill in the blanks and check the appropriate block)					
I, KRISTOFOR M. KILKELLY (Please Print or Type Name)	, do hereby accept the appointment					
designated above as: Campaign Treasure	Deputy Treasurer.					
04-20-2018 X						
Date Signature of Campaign Treasurer or Deputy Treasurer						

APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

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APR 2 0 2018

CITY CLERK'S OFFICE

officer before opening the	campa	ign account.	.,	Militaria de la composição					OFFICE	USE	ONLY
1. CHECK APPROPRIATE	BOX(ES	s):							and the second s		
Initial Filing of Form	Re	filing to Change:	XX T	reasure	r/Deputy	☐ Depo:	sitory		Office		Party
2. Name of Candidate (in t	his order	: First, Middle, La	st)			nclude post o				state, a	zip
JERRY FADGEN	1	ittillillinmetri on vinkete kuulukskija sukkees ja sikkees kiid kultus kat ka sa ket ka sa sukkees kiid kultus	***		"21 EA	AST ACE	RE DRI	IVE			
4. Telephone	5. E-ma	il address				TATION	ו ריו ס	004	7.004	_	
(954) 584-9786	JERF	RYFAD@AO	L.CC	MC	PLAN	NOITATION	I, FL 3	337	7-2640	J	
6. Office sought (include d	istrict, ci	rcuit, group numbe	er)		•	candidate fo	or a <u>non</u> p	<u>artis</u>	an office	, chec	k If
PLANTATION MA	4YOR				app	licable: My inte	ent is to ru	ın as	a Write-Ir	ı cand	date.
8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is				nt is to run	asa	***************************************					
☐ Write-In ☐ No Party Affiliation ☐Party car					ty cand	lidate.					
I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer											
JERRY FADGEN						MARIAMANA MARIA MARIAMANA					
11. Mailing Address 12. Telephone						Marie Control of Contr					
21 EAST ACRE	DRIV	E					(954	4 5	84-978	36	
13. City	1	ounty	15. Sta	ate	16. Zip Co		nail addre	ess	en e	Name of the last o	**************************************
PLANTATION	CHARLES CONTRACTOR	OWARD	FL		33317-			water distance in the			
18, I have designated the	followin	g bank as my] Pri	mary Depo	sitory	Seco	ondar	y Deposito	ory	
19. Name of Bank				20. Address 7001 W BROWARD BLVD						to Control of the Con	
BANK OF AMER	CA		a about the contract of the co	700			BLV				
21. C ty PLANTATION		22. County BROWARD	`		23. S	tate		1	24. Zip Ci		0
								With Company	33317-		Company of the last of the las
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25. Date				26. Si	gnature of	Candidate	70)		DAMAGE CONTRACTOR OF THE PARTY	and and described the same and an annual section of the same and the s
04-20-2018	te dan monuseud			X	1	The same of	food	- F			
27. Treasure	r's Acc	eptance of Appoi	ntmen	t (fill in	the blanks	and check t	he appro	priate	block)		
, JERRY FADO		se Print or Type N	ama)			, do	hereby a	ccept	the appoi	ntmen	it
designated above as:	(r isa	Campaign Tr		r [Deput	ty Treasurer.					
04-20-2018			X	_	70	ulas of	tal	3			
Date)		178 000 0000 ggggron wijgenoon na An	Signa	ure of Can	npaign Treas	surer or D	eput	y Treasur	er	- Committee - Annah Carlo

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(1) NAME: JERRY FADGEN FOR MAYOR

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

(3) I.D. NUMBER:

N/A

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(2) ADDRES	S: 21 EAST AC	CRE DR., PLAN	ITATION, FL	33317			
(4) CHECK A	APPROPRIATE BOX	((ES):					
XXX	CANDIDATE (OFF	ICE SOUGHT):	PLANTATIO	N MAYOR			
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ELECTIONEERING COMMUNICATION		TION	Separate and separate separate	COMMUNICATION REPORTS WILL BE			
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COVER PE	ERIOD: 04-01-18	THROUGH	04-30-18		REPORT TYPE:	M4	
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NA-LUIND		Ψ0.00		(8) OTHER DISTRIE	BUTIONS	\$0.00	
		\$6,000.00		(10) TOTAL MONE		\$0.00	and the springs
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I CERTIFY T AND IT IS TE				I CERTIFY THAT I I AND IT IS TRUE, C	HAVE EXAMINED ORRECT, AND C	THIS REPORT OMPLETE.	
KRISTOFOR	KILKELLY			JERRY FADGEN			
NAME OF X	XX TREASURER	DEPUTY TREASL		NAME OF CANDIDATE XXX		CHAIRMAN (PC/PT ONLY)	*****
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SIGNATURE				SIGNATURE	1/	/	
						•	

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) NAME: JERRY FADGEN FOR MAYOR		(2) I.D.	NUMBER: N	I/A	
(3) COVER PERIOD: 04-01-18 THROUGH (- 04-30-18		(4) PAGE:	1 OF 1	
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DATE/	TYPE/	CONTRI-	IN-KIND	, /	()
(6)	OCCUPATION	BUTION	DESCRIP-	AMEND-	
SEQ. NO. NAME, ADDRESS, ZIP	IF > \$100	TYPE	TION	MENT	AMOUNT
NO ACTIVITY FOR THIS PERIOD				************	

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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) NAME: JERRY FADGEN FOR MAYOR	(2) I.D. NUMBER: N/A
(3) COVER PERIOD: 04-01-18 THROUGH 04-30-18	(4) PAGE: 1 OF 1
(5) (7) DATE/	(8) (9) (10) (11) EXPEN-
(6) SEQ. NO. NAME, ADDRESS, ZIP	DITURE AMEND- PURPOSE TYPE MENT AMOUNT
NO ACTIVITY FOR THIS PERIOD.	

CAMPAIGN LOANS REPORT ITEMIZED

Page 1 of 1 (PLEASE TYPE) FULL NAME AND ADDRESS OF LENDER: FULL NAME AND ADDRESS OF LENDER: JERRY FADGEN 21 EAST ACRE DRIVE PLANTATION, FL 33317 OCCUPATION: CPA OCCUPATION: AMOUNT OF LOAN: \$6,000 AMOUNT OF LOAN: DATE RECEIVED: 04/24/2018 DATE RECEIVED: FULL NAME AND ADDRESS OF LENDER: FULL NAME AND ADDRESS OF LENDER: OCCUPATION: OCCUPATION: AMOUNT OF LOAN: _____ AMOUNT OF LOAN: _____ DATE RECEIVED: DATE RECEIVED: ____ FULL NAME AND ADDRESS OF LENDER: FULL NAME AND ADDRESS OF LENDER:

OCCUPATION:

AMOUNT OF LOAN: _____

DATE RECEIVED:

OCCUPATION: _____

AMOUNT OF LOAN: _____

DATE RECEIVED:

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

OFFICE USE ONLY

RECEIVED

APR 20 2018

CITY CLERK'S OFFICE

JERRY FA	DGEN	1
candidate for the office	of PLANTATIO	N MAYOR ;
have been provided ac	cess to read and u	inderstand the requirements of
Chapter 106, Florida S	tatutes.	
X Juny	Jacog —	04-20-2018
Signature of	f Candidate	Date
ach candidate must file a	statement with the	qualifying officer within 10 days after th

Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida

Statutes).