

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 CITY OF SUNRISE
 19 FEB -4 PM 2:15

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 22ND TERRACE

Address (number and street)

SUNRISE FL 33323

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE GROUP C

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 11/02/2018/ To 02/04/2019/ Report Type: TR

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , , .

Loans \$ 0 , , .

Total Monetary \$ 0 , , .

In-Kind \$ 0 , , .

(7) Expenditures This Report

Monetary Expenditures \$ 1751.22 , .

Transfers to Office Account \$, , .

Total Monetary \$ 1751.22 , .

(8) Other Distributions

\$ 0 , , .

(9) TOTAL Monetary Contributions To Date

\$ 16540.00 , .

(10) TOTAL Monetary Expenditures To Date

\$ 16540.00 , .

(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) SYDNEY W CORBIN

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

X 
Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 11/02/2018 / _____ / _____ through 12/04/2019 / _____ / _____

(4) Page 1 of 2

CITY CLERK
 CITY OF SUNRISE
 19 FEB - 11 PM 2:15

(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	Amount
(6) Sequence Number					
11/14/2018 / /	ANEDOT 555 HILTON AVE #106 BATON ROUGE LA 70808	PROCESSING FEE	MON		14.50
1					
11/14/2018 / /	MELANA VARELES 8641 NW 28 PL SUNRISE FL 33322	CAMPAIGN WORKER	MON		100.00
2					
11/15/2018 / /	TYRICK WOODS 116 GARDENS DRIVE POMPANO BCH FL 33321	CAMPAIGN WORKER	MON		63.00
3					
11/15/2018 / /	TREY OVERTON 7011 N W 98 TER TAMARAC FL 33321	CAMPAIGN WORKER	MON		63.00
11/16/2018 / /	LOUADDIE ROBINSON 511 S W 29 AVE FT LAUDERDALE FL 33312	SIN INSTAL/REMOVER	MON		200.00
5					
11/19/2018 / /	NATALIE GORBAN 3060 HOLIDAY SPRINGS BLVD APT 308 MARGATE FL 33063	CAMPAIGN WORKER	MON		100.00
6					
11/19/2018 / /	MALANA VERALES	CAMPAIGN WORKER	MON		120.00
7					
11/19/2018 / /	NATALIE GORBAN 3060 HOLIDAY SPRINGS BLVD APT 308 MARGATE FL 33063	CAMPAIGN WORKER	MON		100.00
8					

CAMPAIGN TREASURER'S REPORT -- ITEMIZED EXPENDITURES

(1) Name JEPTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 11/02/2018 / _____ through 02/04/2019 / _____

(4) Page 2 of 2

CITY CLERK
 CITY OF SUNRISE
 19 FEB -4 PM 2:16

(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					
11/19/2018 / / 9	NATALIE GORBAN 3060 HOLIDAY SPRINGS BLVD APT 308 MARGATE FL 33063	CAMPAIGN WORKER	MON		100.00
11/19/2018 / / 10	ARMANDO NUNEZ 6851 S W 1 ST CT PEMBROKE PINES FL 33023	CAMPAIGN WORKER	MON		63.00
11/21/2018 / / 11	TYLER JONES WOOD 3971 WILD LIME LANE CORAL SPRINGS FL 33065	CAMPAIGN WORKER	MON		90.00
11/23/2018 / / 12	BRANDEN TREACY 78808 NUTMEG CT TAMARAC FL 33321	CAMPAIGN WORKER	MON		63.00
11/30/2018 / / 13	SUNTRUST BANK 12396 WEST SUNRISW BLD SUNRISE FL 33323	BANK CHARGES	MON		3.00
12/31/2018 / / 14	SUNTRUST BANK 12396 WEST SUNRISW BLD SUNRISE FL 33323	BANK CHARGES	MON		3.00
01/26/2019 / / / /	Jeff Holness 3887 NW 122 Terrace Sunrise, FL 33323	Loan Reimbursement	MON		668.72
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 11/02/2018 / ____ / ____ through 02/04/2019 / ____ / ____

(4) Page 1 of ____

CITY CLERK
CITY OF SUNRISE
19 FEB -4 PM 2:16

(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
/ /							
/ /							
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/ /							
/ /							

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
 CITY OF SUNRISE
 19 FEB -4 PM 2:13

(1) JEPHTHA "JEFF" HOLNESS
 Name
 (2) 3887 N W 22ND TERRACE
 Address (number and street)
SUNRISE FL 33323
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: CITY OF SUNRISE GROUP C
 Political Committee (PC)
 Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) Check here if PTY has disbanded
 Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10/20/2018/ To 11/01/2018/ Report Type: G7
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1175 , ____ . ____
 Loans \$ 400 , ____ . ____
 Total Monetary \$ 1575 , ____ . ____
 In-Kind \$ 0 , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 4120.53 , ____ . ____
 Transfers to Office Account \$ ____ , ____ . ____
 Total Monetary \$ 4120.53 , ____ . ____

(8) Other Distributions
 \$ 0 , ____ . ____


(9) TOTAL Monetary Contributions To Date
 \$ 16540.00 , ____ . ____


(10) TOTAL Monetary Expenditures To Date
 \$ 14788.78 , ____ . ____

(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) SYDNEY W CORBIN
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
 X 
 Signature

(Type name) JEPHTHA "JEFF" HOLNESS
 Candidate Chairperson (only for PC and PTY)
 X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/20/2018 / / through 11/01/2018 / /

(4) Page 1 of _____

19 FEB -4 PM 2:17
CITY CLERK
CITY OF SUNRISE

(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						
10/27/2018 / / 1	SEARS, BRENDA 5010 S W 19TH ST WEST PARL FL 33023	TEACHER	CHE			25.00
10/31/2018 / / 2	HASTINGS, ALCEE 2701 W OAKLAND PARK BLVD FT LAUDERDALE FL 33311	CONGRESSMAN	CHE			100.00
11/01/2018 / / 3	HOLNESS, JEFF 3887 N W 122 ST SUNRISE FL 33323	BUS ED	LOA			400.00
11/01/2018 / / 4	MUIR, DAVID 1310 SW 2ND CT APT 209 FT LAUDERDALE FL 333312	PHOTOGRAPHER	CHE			25.00
11/01/2018 / / 5	CHANG, KARELLE 5807 N W 42ND LANE COCONUT CREEK FL 33073	FLORIST	CHE			50.00
11/01/2018 / / 6	HARR, SHELDON 9860 S W 1ST ST PLANTATION FL 33324	RABBI	CHE			25.00
11/01/2018 / / 7	KURIAN, SAJAN 5883 N W 48 AVE COCNUT CREEK FL 33073	HEALTH CARE	CHE			50.00

18 NOV -2
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/20/2018 / / through 11/01/2018 / /

(4) Page 2 of

CITY CLERK
 CITY OF SUNRISE
 19 FEB -4 PM 2:17

(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		
11/01/2018 / / 1	INGRAM, ANDY 3520 W BROWARD BLVD # 119, FT LAUDERDALE FL 33312		HOTEL OPERA	CHE			50.00
11/01/2018 / / 2	HENRY, MELISSA 350 NE 47 PL POMPANO BEACH FL 33064			CHE			50.00
/ /							
/ /							
/ /							
/ /							
/ /							

CITY CLERK
 CITY OF SUNRISE
 19 NOV -2 PM 2:54

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/20/2018 through 11/01/2018

(4) Page 1 of 1

CITY CLERK
 CITY OF SUNRISE
 19 FEB -4 PM 2:17

(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					
10/27/2018 / / 1	VARELES, MALENA 8641 NW 28 Place Sunrise, FL 33322	CAMPAIGN WORKER	MON		100.00
10/31/2018 / / 2	POSTMASTER C/O TROPICAL MAILER 1111 S W 21 AVE SUITE 24FT LAUDERDALE FL 33312	POSTAGE	MON		1624.53
10/31/2018 / / 3	TROPICAL MAILER INC 1111 S W 21 AVE SUITE 24 FT LAUDERDALE FL 33312	MAILER FEES	MON		335.00
10/31/2018 / / 4	WOODS, GARFIELD 522 N E 1ST AVE # 24 FT LAUDERDALE FL 33301	PROMO ITEMS	MON		2061.00
/ /					
/ /					
/ /					
/ /					

CITY CLERK
 CITY OF SUNRISE
 18 NOV -2 PM 2:54

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 22ND TERRACE

Address (number and street)

SUNRISE FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

18 NOV - 2 PM 2:54

CITY CLERK
CITY OF SUNRISE

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE GROUP C

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 10/20/2018 To 11/01/2018 Report Type: G7

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1275.00 , _____

Loans \$ 400.00 , _____

Total Monetary \$ 1675.00 , _____

In-Kind \$ 0 , _____

(7) Expenditures This Report

Monetary Expenditures \$ 4120.53 , _____

Transfers to Office Account \$ _____ , _____

Total Monetary \$ 4120.53 , _____

(8) Other Distributions

\$ 0 , _____

(9) TOTAL Monetary Contributions To Date

\$ 16270.00 , _____

(10) TOTAL Monetary Expenditures To Date

\$ 14564.83 , _____

(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) SYDNEY W CORBIN

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

X 

Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X 

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 10/20/2018 / _____ / _____ through 11/01/2018 / _____ / _____ (4) Page 1 of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
10/27/2018 / / 1	SEARS, BRENDA 5010 S W 19TH ST WEST PARL FL 33023		TEACHER	CHE			25.00
10/31/2018 / / 2	HASTINGS, ALCEE 2701 W OAKLAND PARK BLVD FT LAUDERDALE FL 33311		CONGRESSMA	CHE			1000.00
11/01/2018 / / 3	HOLNESS, JEFF 3887 N W 122 ST SUNRISE FL 33323		BUS ED	LOA			400.00
11/01/2018 / / 4	MUIR, DAVID 1310 SW 2ND CT APT 209 FT LAUDERDALE FL 333312		PHOTOGRAPH	CHE			25.00
11/01/2018 / / 5	CHANG, KARELLE 5807 N W 42ND LANE COCONUT CREEK FL 33073		FLORIST	CHE			50.00
11/01/2018 / / 6	HARR, SHELDON 9860 S W 1ST ST PLANTATION FL 33324		RABBI	CHE			25.00
11/01/2018 / / 7	KURIAN, SAJAN 5883 N W 48 AVE COCNUT CREEK FL 33073		HEALTH CARE	CHE			50.00

18 NOV -2 - AON 8
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 10/20/2018 / ____ / ____ through 11/01/2018 / ____ / ____ (4) Page 2 of 2

(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
11/01/2018 / / 1	INGRAM, ANDY 3520 W BROWARD BLVD # 119, FT LAUDERDALE FL 33312		HOTELOPERAT	CHE			50.00
11/01/2018 / / 2	HENRY, MELISSA 350 NE 47 PL POMPANO BEACH FL 33064			CHE			50.00
/ /							
/ /							
/ /							
/ /							
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/ /							
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18 NOV 2 PM 2:54
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/20/2018 / _____ / _____ through 11/01/2018 / _____ / _____

(4) Page 1 of 1

(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					
10/27/2018 / / 1	VARELES, MALENA <i>8641 NW 28 Place Sunrise, FL 33322</i>	CAMPAIGN WORKER	MON		100.00
10/31/2018 / / 2	POSTMASTER C/O TROPICAL MAILER 1111 S W 21 AVE SUITE 24FT LAUDERDALE FL 33312	POSTAGE	MON		1624.53
10/31/2018 / / 3	TROPICAL MAILER INC 1111 S W 21 AVE SUITE 24 FT LAUDERDALE FL 33312	MAILER FEES	MON		335.00
10/31/2018 / / 4	WOODS, GARFIELD 522 N E 1ST AVE # 24 FT LAUDERDALE FL 33301	PROMO ITEMS	MON		2061.00
/ /					
/ /					
/ /					
/ /					

CITY CLERK
 CITY OF SUNRISE
 8 NOV - 2 PM 2:54

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 22ND TERRACE

Address (number and street)

SUNRISE FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

19 FEB -4 PM 2:16

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE GROUP C

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 10/06/2018/ To 10/19/2018/ Report Type: G6

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 6045.00 , ____ . ____

Loans \$ 250.00 , ____ . ____

Total Monetary \$ 6295.00 , ____ . ____

In-Kind \$ ____ , ____ , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 3095.50 , ____ . ____

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

Total Monetary \$ 3095.50 , ____ . ____

(8) Other Distributions

\$ 0 , ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 14965.00 , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 10668.25 , ____ . ____

(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) SYDNEY W CORBIN

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

X

Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/06/2018 / _____ / _____ through 10/19/2018 / _____ / _____

(4) Page 1 of _____

CITY CLERK
CITY OF SUNRISE
19 FEB - 4 PM 2:16

(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
		Type	Occupation				
10/10/2018 / / 1	Glendale Properties & Inv 3434 SW College Rd Ocala FL 24974	B	HOTEL	CHE			500
10/12/2018 / / 2	Acclaim Home Care Services 7405 NW 57 St, Tamarac FL 33319	B	Home Care	CHE			100
10/18/2018 / / 3	D&D Services Inc 4301 NW 34 Way Box 10091 Ft Lauderdale FL 33310	B	Auto	CHE			100
10/06/2018 / / 4	Gloria J McClymont 9750 Sunrise Lakes Blvd Apt 209 Bldg 148 Sunrise, FL 33322	I	Retired	CHE			100
10/06/2018 / / 5	Barbara and Delroy Bennett 3006 La Mirage Dr Lauderhill, FL 33319	I		Che			50
10/19/2018 / / 6	20 Street LLC 696 ne 125 St North Miami, FL 33161	B	PropertyManage	CHE			1000
10/19/2018 / / 7	LMC Property Management and Maintenance 696 NE 125 ST N Miami, FL 33161	B	Prop Managemen	CHE			1000

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/06/2018 / / through 10/19/2018 / /

(4) Page 2

CITY CLERK
CITY OF SUNRISE
19 FEB -4 PM 2:16

(5) Date	(6) Sequence Number	(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
			Type	Occupation				
10/19/2018 / /	8	FESTIVAL CENTER LLC 696 N E 125 ST N MIAMI FL33161	B	PROP MGNT	CHE			1000.00
10/19/2018 / /	9	BEACH HOLDING, INC 696 N E 125 ST N MIAMI FL 33161	B	PROP MGNT	CHE			1000.00
10/19/2018 / /	10	LINCOLN SUNRISE LLC 606 N E 125 ST N MIAMI FL 33161	B	CAR DEALERSH	CHE			1000.00
10/17/2018 / /	11	ALBERTO BARCELO 12773 N W 13 ST FT LAUDERDALE FL 33323	II		CHE			75.00
10/18/2018 / /	12	JEFF HOLNESS 3887 N W 122 TERRACE SUNRISE FL 33323	I	EDUCATION	LOA			250.00
10/19/2018 / /	13	ROOSEVELT MCCLARY 3144 N W 40 CT LAUDERDALE LAKES FL 33309	I	ED BTU	CHE			120.00
/ /								
/ /								

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

CITY CLERK
 CITY OF SUNRISE
 19 FEB - 4 PM 2:16

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/06/2018 / / through 10/19/2018 / /

(4) Page 1 of 1

(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					
10/19/2018 / / 1	Junior Dennis 7958 Hampton Blvd N Laud. FL 33068	CAMPAIGN WORKER	MON		150
10/12/2018 / / 2	Garfield Woods 522 NE 1st Ave #24 Ft. Laud FL 33301	Promo Items	MON		1500
10/19/2018 / / 3	Garfield Woods 522 NE 1st Ave #24 Ft. Laud FL 33301	Promo Items	Mon		657.20
10/06/2018 / / 4	Garfield Woods 522 NE 1st Ave #24 Ft. Laud FL 33301	HWAY SIGNS	MON		485
10/17/2018 / / 5	Anedot 555 HILTON AVE 106 BATON ROUGE LA 70808	PROCESSING FEE	MON		3.30
10/17/2018 / / 6	Suntrust Bank 12396 W Sunrise Blvd Sunrise, FL 33323	BANK CHARGES	MON		3.00
10/17/2018 / / 7	Thiery Florival Victor 8471 SW 5 Street Apt 105 Pembroke Pines 33025	Video Production	MON		300
/ /					

CAMPAIGN TREASURER'S REPORT SUMMARY CLERK
CITY OF SUNRISE

(1) JEPHTHA "JEFF" HOLNESS
Name
(2) 3887 N W 22ND TERRACE
Address (number and street)
SUNRISE FL 33323
City, State, Zip Code

OFFICE USE ONLY
18 OCT 26 AM 9:13

Check here if address has changed (3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: CITY OF SUNRISE GROUP C
 Political Committee (PC)
 Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) Check here if PTY has disbanded
 Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10/06/2018 To 10/19/2018 Report Type: G6
 Original Amendment Special Election Report

(6) Contributions This Report
 Cash & Checks \$ 5925.00 , ____ . ____
 Loans \$ ____ , ____ , ____ . ____
 Total Monetary \$ 5925.00 , ____ . ____
 In-Kind \$ ____ , ____ , ____ . ____

(7) Expenditures This Report
 Monetary Expenditures \$ 2795.50 , ____ . ____
 Transfers to Office Account \$ ____ , ____ , ____ . ____
 Total Monetary \$ 2795.50 , ____ . ____

(8) Other Distributions
 \$ 0 , ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date
 \$ 14595.00 , ____ . ____

(10) TOTAL Monetary Expenditures To Date
 \$ 10444.30 , ____ . ____

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

X 
Signature

(Type name) JEPHTHA "JEFF" HOLNESS
 Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 10/06/2018 / _____ / _____ through 10/19/2018 / _____ / _____ (4) Page 1 of 2

(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		
10/10/2018 / / M10	GLENDAL PROPERTIES AND INVEST QUALITY IN, OCALA FL	B	HOTEL	CHE			500.00
10/12/2018 / / M10	ACCLAIM HOME CARE SERVICES INC 7405 N W 57 ST, TAMARAC FL33319	B	HOME CARE SE	CHE			100.00
10/18/2018 / / M10	D&D SERVICES INC BOX 100921 FT LAUDERDALE FL 33310	B		CHE			100.00
10/06/2018 / / M10	GLORIA J MCLYMONT	I		CHE			100.00
10/06/2018 / / M10	BARBARA & DELROY BENNETT 3006 LA MIRAG DR LAUDERHILL FL33319	I		CHE			50.00
10/19/2018 / / M10	20 STREET LLC 696 NE 125 ST NORTH MIA FL 33161	B		CHE			1000.00
10/19/2018 / / M10	LMC PROPERTY MANAGEMENT & MAINTENANCE 696 NE 125 ST N MIA FL 33161	B	PROP MGMT	CHE			1000.00

18 OCT 26 AM 9:13
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 10/06/2018 / _____ / _____ through 10/19/2018 / _____ / _____ (4) Page 2 of 2

(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
10/19/2018 / / 8	FESTIVAL CENTER LLC 696 N E 125 ST N MIAMI FL33161	B	PROP MGNT	CHE			1000.00
10/19/2018 / / 9	BEACH HOLDING, INC 696 N E 125 ST N MIAMI FL 33161	B	PROP MGNT	CHE			1000.00
10/19/2018 / / M10	LINCOLN SUNRISE LLC 606 N E 125 ST N MIAMI FL 33161	B	CAR DEALERSH	CHE			1000.00
10/17/2018 / / 11	ALBERTO BARCELO 12773 N W 13 ST FT LAUDERDALE FL 33323			CHE			75.00
/ /							
/ /							
/ /							

18 OCT 26 AM 9:13
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 10/06/2018 / / through 10/19/2018 / /

(4) Page 1 of 1

(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					
10/19/2018 / / 1	JUNIOR DENNIS 7958 HAMPTON BLVD N LAUDERDALE FL 33068	CAMPAIGN WORKER	MON		150.00
10/12/2018 / / 2	GARFIELD WOODS 522 N E 1ST AVE # 24 FT LAUDERDALE FL 33301	PROMO ITEMS	MON		1500
10/19/2018 / / 3	GARFIELD WOODS 522 N E 1ST AVE #24 FT LAUDERDALE FL 33301	PROMO ITEMS	MON		657.20
10/06/2018 / / 4	GARFIELD WOODS 522 NE 1ST AVE # 24 FT LAUDERDALE FL 33301	HWAY SIGNS	MON		485.00
10/17/2018 / / 5	ANEDOT 555 HILTON AVE 106 BATON ROUGE LA 70808	PROCESS FEE	MON		3.30
/ /					
/ /					
/ /					

18 OCT 26 AM 9:13

CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE
19 FEB -4, PM 2: 6

(1) JEPHTHA "JEFF" HOLNESS
 Name
 (2) 3887 N W 22ND TERRACE
 Address (number and street)
SUNRISE FL 33323
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: CITY OF SUNRISE GROUP C
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 09/01/2018/ To 10/05/2018/ Report Type: G4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 960.00 , ____ . ____

Loans \$ 1700.00 , ____ . ____

Total Monetary \$ 2660.00 , ____ . ____

In-Kind \$ 1280.00 , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 3078.00 , ____ . ____

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

Total Monetary \$ 3078.00 , ____ . ____

(8) Other Distributions

\$ 0 , ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 8670.00 , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 7569.75 , ____ . ____

(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) SYDNEY W CORBIN

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

X 
 Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X 
 Signature

19 FEB -4 PM 2:16

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____
 (3) Cover Period 09/01/2018 / _____ / _____ through 10/05/2018 / _____ / _____ (4) Page 1 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(9) Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
09/13/2018 1	JEFF HOLNESS 3887 N W 22ND TER SUNRISE FL 33323	LOA	ED/BUS OWNE	CHE			500.00
09/13/2018 2	SHARON AIKEN 1484 GADDIS RD CANTON GA 30115		RETIRED	CHE			250.00
09/24/2018 3	LANCE HOLNESS 9706 N W 7 th CT TAMARAC 33321		POLICE OFFIC	CASH			50.00
09/24/2018 4	KERNETT HOLLINGSHEAD 8030 Hampton Blvd, Apt 411 North Lauderdale 33068		CLERK	CASH			40.00
09/24/2018 5	TYLER JONES WOOD 3971 WILD LIME LANE CORAL SPRINGS FL 33065		STUDENT	CASH			20.00
09/24/2018 6	OUIDA MCDONALD 4816 N W 23RD ST LAUDERHILL, FL 33313		PASTOR	CASH			50.00
9/25/2018 7	JEFF HOLNESS 3887 N W 22ND TER SUNRISE FL 33323	LOA	ED BUS OWNE	CHE			700.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

18 OCT 12 PM 4:26
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

CITY CLERK
CITY OF SUNRISE

19 FEB -4 PM 2:16

(1) Name JEFFTHA "JEFF" HOLNESS (2) I.D. Number _____
 (3) Cover Period 09/01/2018 / / through 10/05/2018 / / (4) Page 2 of 3

(5) Date	(6) Sequence Number	(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
			Type	Occupation				
09/18/2018 8	1	ALFRED LEWERS 4840 NW 55 DR COCONUT CREEK FL 33073		ADMIN	CHE			200.00
09/19/2018 9	1	EGERTON BULLOCH 11191 RED HAWK ST PLANTATION FL 33324		FIN ADVISOR	CHE			50.00
09/20/2018 10	1	NICOLA GARCIA 1 BURGHDOCK LANE AUGUSTA ME 04330		MD	CHE			50.00
09/20/2018 11	1	CARL GAYLE 8940 NW PL PLANTATION FL 33324		ADMIN	CHE			50.00
09/22/2018 12	1	SHARON WONG HOLLIS 9102 NW 48 ST SUNRISE FL 33351		REAL ESATE A	CHE			200.00
10/05/2018 13	1	JEFF HOLNESS 3887 N W 122 TER SUNRISE FL 33323	LOA	ED BUS	CHE			500.00
09/02/2018 14	1	GWD 522 N E 1ST AVE 3 24 FT LAUDEDALE FL33301	B	PRINTING	INK	WEB DESIGN UF		900.00

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

18 OCT 12 PM 4:26

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

CITY CLERK
CITY OF SUNRISE

19 FEB -4 PM 2:16

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 09/01/2018 / / through 10/05/2018 / / (4) Page 3 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	Amount
(6) Sequence Number							
09/20/2018 / / 15	KRAVE NIGHT CLUB 4619 N PINE ISLAND RD SUNRISE FL 33351	IB	ENT CLUB	INK	RENTAL CLUB		200.00
09/09/2018 / / 16	DALE HOLNESS 4331 W SUNRISE BLVD PLANTATION FL 33313	IB	REALSTATE	INK	MEDIA PROMO		100.00
/ / M9							
/ / M9							
/ / M9							
/ / M9							
/ / M9							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

18 OCT 12 PM 4:26

CITY CLERK
CITY OF SUNRISE

19 FEB - 4 PM 2:16

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 09/01/2018 through 10/05/2018

(4) Page 1 of 1

(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
09/14/2018 / 1	JUNIOR DENNIS 7958 HAMPTON BLVD N LAUDERDALE, FL 33068	CAMPAIGN WORKER	MON		125.00
09/19/2018 / 2	GARFIELD WOODS 522 NE 1ST AVE #24 FT LAUDERDALE FL 33301	PROMO ITEMS	MON		401.50
09/19/2018 / 3	GWD 522 NE 1ST AVE #24 FT LAUDERDALE, FL 33301	PROM ITEMS	MON		1400.00
09/27/2018 / 4	JUNIOR DENNIS 7958 HAMPTON BLVD N LAUDERDALE, FL 33068	CAMPAIGN WORKER	MON		125.00
09/28/2018 / 5	LOUADIE ROBINSON 511 SW 29TH AVE FT LAUDERDALE FL 33312	HIGH WAY SIGNS/ INST	MON		1000.00
09/28/2018 / 6	SUNTRUST BANK P O BOX 305183 NASHVILLE TN 37230	BANK CHARGES	MON		3.00
09/22/2018 / 7	ANEDOT 5555 HILTON AVE # 106 BATON ROHUE LA 70805	PROCESS FEES	MON		23.50
1 /					

CITY CLERK
CITY OF SUNRISE

18 OCT 12 PM 4:27

CITY CLERK
CITY OF SUNRISE

19 FEB - 4 PM 2:16

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number
(3) Cover Period 09/01/2018 / through 10/05/2018 / (4) Page 1 of 1

(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) Related Expenditures	(10) Amendment	(11) Amount	(6) Sequence Number	Distribution Type
/ /							
/ /							CITY CLERK CITY OF SUNRISE
/ /							18 OCT 12 PM 4:27
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT SUMMARY

 CITY CLERK
 CITY OF SUNRISE

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 22ND TERRACE

Address (number and street)

SUNRISE FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

18 OCT 12 PM 4:26

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE GROUP C

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 09/01/2018/ To 10/05/2018/ Report Type: 64

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 960 , _____ . _____

Loans \$ 1700 , _____ . _____

Total Monetary \$ 2660 , _____ . _____

In-Kind \$ 1280 , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ 1778 , _____ . _____

Transfers to Office Account \$ _____ , _____ . _____

Total Monetary \$ 1778 , _____ . _____

(8) Other Distributions

\$ 0 , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ 8670 , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ 7648.80 , _____ . _____

(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) SYDNEY W CORBIN

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

X 
Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 09/01/2018 / _____ / _____ through 10/05/2018 / _____ / _____ (4) Page 1 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
(6) Sequence Number							
09/13/2018 1	JEFF HOLNESS 3887 N W 22ND TER SUNRISE FL 33323	LOA	ED/BUS OWNER	CHE			500.00
09/13/2018 2	SHARON AIKEN 1484 GADDIS RD CANTON GA 30115		RETIRED	CHE			250.00
09/24/2018 3	LANCE HOLNESS 9706 N W 70 CT TAMARAC 33321		POLICE OFFICER	CASH			50.00
09/24/2018 4	KERNETT HOLLINGSHEAD 8030 Hampton Blvd, Apt 411 North Lauderdale 33068		CLERK	CASH			40.00
09/24/2018 5	TYLER JONES WOOD 3971 WILD LIME LANE CORAL SPRINGS FL 33065		STUDENT	CASH			20.00
09/24/2018 6	OUIDA MCDONALD 4816 N W 23RD ST LAUDERHILL, FL 33313		PASTOR	CASH			50.00
9/25/2018 7	JEFF HOLNESS 3887 N W 22ND TER SUNRISE FL 33323	LOA	ED BUS OWNER	CHE			700.00

18 OCT 12 PM 4:26
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 09/01/2018 / _____ / _____ through 10/05/2018 / _____ / _____ (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
09/18/2018 8	ALFRED LEWERS 4840 NW 55 DR COCONUT CREEK FL 33073	I	ADMIN	CHE			200.00
09/19/2018 9	EGERTON BULLOCH 11191 RED HAWK ST PLANTATION FL 33324	I	FIN ADVISOR	CHE			50.00
09/20/2018 10	NICOLA GARCIA 14 BURGHDOCK LANE AUGUSTA ME 04330	I	MD	CHE			50.00
09/20/2018 11	CARL GAYLE 8940 NW 9 PL PLANTATION FL 33324	I	ADMIN	CHE			50.00
09/22/2018 12	SHARON WONG HOLLIS 9102 NW 48 ST SUNRISE FL 33351	I	REAL ESATE AG	CHE			200.00
10/05/2018 13	JEFF HOLNESS 3887 N W 122 TER SUNRISE FL 33323	LOA	ED BUS	CHE			500.00
09/02/2018 14	GWD 522 N E 1ST AVE 3 24 FT LAUDEDALE FL33301	B	PRINTING	INK	WEB DESIGN UF		980.00

18 OCT 12 PM 4:26

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 09/01/2018 / _____ / _____ through 10/05/2018 / _____ / _____ (4) Page 3 of 3

(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				
09/20/2018 / / 15	KRAVE NIGHT CLUB 4519 N PINE ISLAND RD SUNRISE FL 33351	B	ENT CLUB	INK	RENTAL CLUB		200.00
09/09/2018 / / 16	DALE HOLNESS 4331 W SUNRISE BLVD PLANTATION FL 33313	IB	REALSTATE	INK	MEDIA PROMO		100.00
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M9		I					
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M9		II					
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M9		I					
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M9		I					
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M9							

18 OCT 12 PM 4:26

CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 09/01/2018 / _____ / _____ through 10/05/2018 / _____ / _____

(4) Page 1 of 1

(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
09/14/2018 / / 1	JUNIOR DENNIS 7958 HAMPTON BLVD N LAUDERDALE, FL 33068	CAMPAIGN WORKER	MON		125.00
09/19/2018 / / 2	GARFIELD WOODS 522 NE 1ST AVE #24 FT LAUDERDALE FL 33301	PROMO ITEMS	MON		401.50
09/19/2018 / / 3	GWD 522 NE 1ST AVE #24 FT LAUDERDALE, FL 33301	PROM ITEMS	MON		1400.00
09/27/2018 / / 4	JUNIOR DENNIS 7958 HAMPTON BLVD N LAUDERDALE, FL 33068	CAMPAIGN WORKER	MON		125.00
09/28/2018 / / 5	LOUADDIE ROBINSON 511 SW 29TH AVE FT LAUDERDALE FL 33312	HIGH WAY SIGNS/ INST	MON		1000.00
09/28/2018 / / 6	SUNTRUST BANK P O BOX 305183 NASHVILLE TN 37230	BANK CHARGES	MON		3.00
09/22/2018 / / 7	ANEDOT 5555 HILTON AVE # 106 BATON ROHUE LA 70808	PROCESS FEES	MON		23.50
/ /					
/ /					

18 OCT 12 PM 4:27
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name JEPTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 09/01/2018 / through 10/05/2018 / (4) Page 1 of 1

(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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
(6) Sequence Number						
/ /						
/ /						CITY CLERK CITY OF SUNRISE 18 OCT 12 PM 4:27
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CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK
CITY OF SUNRISE
19 FEB -4 PM 2:16

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 122ND TERRACE

Address (number and street)

SUNRISE, FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE COMMISSION GROUP C

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 08/01/2018/ To 08/31/2018/ Report Type: M8

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 400.00 , ____ . ____

Loans \$ 1010.00 , ____ . ____

Total Monetary \$ 1410.00 , ____ . ____

In-Kind \$ 0 , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 38.25 , ____ . ____

Transfers to Office Account \$ ____ , ____ . ____

Total Monetary \$ 38.25 , ____ . ____

(8) Other Distributions

\$ ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 6010.00 , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 4491.75 , ____ . ____

(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) SYDNEY W CORBIN

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

X

Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 08/01/2018 / ____ / ____ through 8/31/2018 / ____ / ____ (4) Page 1 of 1

(5) Date	(6) Sequence Number	(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
			Type	Occupation				
08/30/2018 / /	1	Jeff Holness 3887 NW 122 Terrace Sunrise, FL 33323	LOA	ED/BUS	CHE			
8/9/2018 / /	2	Jeff Holness 3887 NW 122 Terrace	LOA	ED/BUS	CHE			10
8/17/2018 / /	3	Ken Thurston 5507 Constant Spring Terr Lauderhill, FL 33319		Real Estate	CHE			200
8/20/2018 / /	4	Ben Wood 3871 Wild Lime Ln Coral Springs, FL 33065		Pharmacist	CHE			200
/ /								
/ /								
/ /								

CITY CLERK
 CITY OF SUNRISE
 19 FEB -4 AM 2:18

CITY CLERK
 CITY OF SUNRISE
 19 FEB - 4 PM 2:16

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 08/01/2018 / _____ / _____ through 08/31/2018 / _____ / _____

(4) Page 1 of 1

(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					
08/08/2018 / / 1	SUNTRUST BANK 12396 W SUNRISE BLVD SUNRISE FL 33323	BANK CHARGES	MON		27.95
08/15/2018 / / 2	SUNTRUST BANK 12396 W SUNRISE BLVD SUNRISE FL 33323	BANK FEE	MON		3.00
08/20/2018 / / 3	ANEDOT 5555 HILTON AVE # 106 BATON ROUGE LA 70808	PROCESSING FEES	MON		7.30
/ /					
/ /					
/ /					
/ /					
/ /					

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **JEPHTHA "JEFF" HOLNESS**

Name

(2) **3887 N W 22ND TERRACE**

Address (number and street)

SUNRISE FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: **CITY OF SUNRISE GROUP C**

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

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

18 SEP 10 AM 11:35

(5) Report Identifiers

Cover Period: From 08/01/2018 To 08/31/2018 Report Type: M8

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 400.00 , ____ . ____

Loans \$ 1010.00 , ____ . ____

Total Monetary \$ 1410.00 , ____ . ____

In-Kind \$ 0 , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 1417.30 , ____ . ____

Transfers to Office Account \$ ____ , ____ . ____

Total Monetary \$ 1417.30 , ____ . ____

(8) Other Distributions

\$ 0 , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 6010.00 , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 5870.80 , ____ . ____

(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) **SYDNEY W CORBIN**

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

[Signature]

X

Signature

(Type name) **JEPHTHA "JEFF" HOLNESS**

Candidate Chairperson (only for PC and PTY)

[Signature]

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 08/01/2018 / _____ / _____ through 08/31/2018 / _____ / _____ (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
08/30/2018 / / M 8	JEFF HOLNESS 3887 N W 122 TER SUNRISE FL 33323	LOA	EDBUS	CHE			1000
08/09/2018 / / M8	JEFF HOLNESS 3887 N W 122 TER SUNRISE FL 33323	LOA	EDBUS	CHE			10
08/17/2018 / / M8	KEN THURSTON 5507 CONSTANT SPRING TERRACE LAUDERHILL FL 33319	II	REAL ESATE	CHE			200
08/20/2018 / / M8	BEN WOOD 3971 WILD LIME LANE CORAL SPRINGS FL 33065	II	PHARMACIIST	CHE			200

18 SEP 10 AM 11:39
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 08/01/2018 / _____ / _____ through 08/31/2018 / _____ / _____

(4) Page 1 of 1

(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					
08/20/2018 / / / M8	ANEDOT 5555 HILTON AVE #106 BATON ROUGE LA 70808	MON	PPROCESING FI		17.30
08/29/2018 / / /	G W D 522 N E 1ST AVE #24 FT LAUDERDALE FL 33301	PROMOTIONAL MATERIALS	MON		1400
/ /					
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18-SEP-10 AM 11:55
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 08/01/2018 / _____ through 08/31/2018 / _____ (4) Page 1 of 1

(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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
(6) Sequence Number						
/ / M8	NONE	NA				NONE
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18 SEP 10 AM 11:35
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **JEPHTHA "JEFF" HOLNESS**

Name

(2) **3887 N W 22ND TERRACE**

Address (number and street)

SUNRISE FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: **CITY OF SUNRISE GROUP C**

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

OFFICE USE ONLY

18 SEP 10

AM 11:35

CITY CLERK
CITY OF SUNRISE

(5) Report Identifiers

Cover Period: From **08/01/2018** To **08/31/2018** Report Type: **M8**

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ **400.00** , _____

Loans \$ **1010.00** , _____

Total Monetary \$ **1410.00** , _____

In-Kind \$ **0** , _____

(7) Expenditures This Report

Monetary Expenditures \$ **1417.30** , _____

Transfers to Office Account \$ _____ , _____

Total Monetary \$ **1417.30** , _____

(8) Other Distributions

\$ **0** , _____

(9) TOTAL Monetary Contributions To Date

\$ **6010.00** , _____

(10) TOTAL Monetary Expenditures To Date

\$ **5870.80** , _____

(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) **SYDNEY W CORBIN**

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

X _____
Signature

(Type name) **JEPHTHA "JEFF" HOLNESS**

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 122ND TERRACE

Address (number and street)

SUNRISE, FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

18 AUG 10 AM 9:49
CITY CLERK
CITY OF SUNRISE

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE COMMISSION GROUP C

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 07/01/2018 To 07/31/2018 Report Type: M7

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ 500.00 , _____ . _____

Total Monetary \$ 500.00 , _____ . _____

In-Kind \$ 122.00 , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ 1406.50 , _____ . _____

Transfers to Office Account \$ _____ , _____ . _____

Total Monetary \$ 1406.50 , _____ . _____

(8) Other Distributions

\$ _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ 4600.00 , _____ . _____

(10) TOTAL Monetary Expenditures To Date

\$ 4453.50 , _____ . _____

(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) SYDNEY W CORBIN

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

X

Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 07/01/2018 / _____ / _____ through 07/31/2018 / _____ / _____ (4) Page 1 of 1

(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				
7/31/2018 / / M 7	JEFF HOLNESS 3887 N W 122 TR SUNRISE, FL 33323	LOA	EDBUS	CHE			500.00
07/04/2018 / / M 7	KIM WILLIAMS 4225 WEST SUNRISE BLVD PLANTATION, FL 33312		REAL ESTATE	INK	CANDY DECOR/		122.00
/ / M 7							
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18 AUG 10 AM 9:49
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 07/01/2018 / ____ / ____ through 07/31/2018 / ____ / ____

(4) Page 1 of 1

(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					
07/31/2018 / /	SUNTRUST BANK 12396 W SUNRISE BLVD SUNRISE FL 33323	BANK CHARGES	MON		8.00
M7					
07/30/2018 / /	GARFIELD WOODS 522 NE 1ST AVE #24 FT LADERDALE FL 33301	PALM, BUS CARDS, CAR MAGNETS ETC	MON		1298.50
M7					
07/14/2018 / /	JUNIOR DENNIS 7958 HAMPTON BLVD NORTH LAUDERDALE FL 33068	CAMPAIGN WORKER	MON		100.00
M7					
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18 AUG 13 AM 9:49
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 07/01/2018 / through 07/31/2018 / (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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
/ /	NONE	NONE	NONE		NONE	NA
M7						
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18 AUG 10 AM 9:49
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 122ND TER

Address (number and street)

SUNRISE, FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE COMMISSION GROUP C

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

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
18 JUL 10 AM 10:31

(5) Report Identifiers

Cover Period: From 06/01/2018 To 06/30/2018 Report Type: M6

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 3050.00 , _____

Loans \$ 150.00 , _____

Total Monetary \$ 3200.00 , _____

In-Kind \$ 0 , _____

(7) Expenditures This Report

Monetary Expenditures \$ 3044.00 , _____

Transfers to Office Account \$ 0 , _____

Total Monetary \$ 3044 , _____

(8) Other Distributions

\$ 0 , _____

(9) TOTAL Monetary Contributions To Date

\$ 4100.00 , _____

(10) TOTAL Monetary Expenditures To Date

\$ 3047.00 , _____

(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) SYDNEY W CORBIN

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

X _____
Signature

(Type name) JEPHTHA JEFF HOLNESS

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 06/01/2018 / _____ / _____ through 06/30/2018 / _____ / _____ (4) Page 1 of 2

(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							
06/04/2018 / / M 6	KENNETH STROCHAK BOX 431464 MIAMI FL 32243	1	CEO	CHE			500.00
06/08/2018 / / M6	ROBERT & DENISE HORLAND 1581 NW 101ST WAY PLANTATION FL 33328	1	RETIRED	CHE			100.00
06/08/2018 / / M 6	ALISTAIR MACLEOD 6521 SW 13 ST PLANTATION, FL 33317	1	RETIRED	CASH			50.00
06/18/2018 / / M6	SYDNEY & ELIZABETH CORBIN 7930 n w 5TH CT PLANTATION FL 33324	1	RETIRED	CHE			100.00
06/21/2018 / / M 6	THE RUBIN GROUP 450 E LAS OLAS BLVD # 1250 FT LAUD FL 33301		LAW FIRM	CHE			1000.00
06/21/2018 / / M6	SHARON AIKEN 1484 GADDIS RD CANTON GA 30115	1	RETIRED	CHE			250.00
06/20/2018 / / M6	JEFF HOLNESS 3887 N W 122 TR SUNRISE FL 33323	LOA	ED/BUS	CHE			150.00

18 JUL 10 AM 10:31
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____
 (3) Cover Period 06/01/2018 / _____ / _____ through 06/30/2018 / _____ / _____ (4) Page 2 of 2

(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				
06/19/2018 / / M 6	RON JACOBS 1700 N W 93RD TERRACE PLANTATION FL 33322		ATTORNEY	CHE			500.00
06/28/2018 / / M 6	FVP SAWGRASS LLC 4611 S UNIVERSITY DR DAVIE, FL 33328	BUA	PROP DEV FIR	CHE			500.00
06/08/2018 / / M 6	KAY MACLEOD 6621 S W 130ST PLANTATION FL 33317		RETIRED	CASH			50.00
/ / M 6							
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/ / M 6							
/ / M 6							

CITY CLERK
 CITY OF SUNRISE
 18 JUL 10 AM 10:31

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 06/01/2018 / _____ / _____ through 06/30/2018 / _____ / _____

(4) Page 1 of 1

(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					
06/22/2018 / / /	CITY OF SUNRISE 10770 W OAKLAND PARK BLVD SUNRISE, FL 33351	ELECTION QUALIFYING FEE	CAN		3044.00
M 6					
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CITY CLERK
 CITY OF SUNRISE
 18 JUL 10 AM 10:31

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name **JEPHTHA "JEFF" HOLNESS**

(2) I.D. Number

(3) Cover Period **06/01/2018 /**

through 06/30/2018 /

(4) Page **1** of **1**

(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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
/ /	NONE	NONE			0	
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18 JUL 10 AM 10:31
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 122ND TER

Address (number and street)

SUNRISE, FL 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

18 JUN 11 PM 2:43
CITY CLERK
CITY OF SUNRISE, FL

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE COMMISSION GROUP C

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 05/01/2018 To 05/31/2018 Report Type: M5

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 300.00 , ____ . ____

Loans \$ 500.00 , ____ . ____

Total Monetary \$ 800.00 , ____ . ____

In-Kind \$ 0 , ____ . ____

(7) Expenditures This Report

Monetary Expenditures \$ 3.00 , ____ . ____

Transfers to Office Account \$ 0 , ____ . ____

Total Monetary \$ 3.00 , ____ . ____

(8) Other Distributions

\$ 0 , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 900.00 , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 3.00 , ____ . ____

(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) SYDNEY W CORBIN

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

X 

Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X 

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 05/01/2018 / _____ / _____ through 05/31/2018 / _____ / _____ (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	Amendment	Amount
05/31/2018 / / M 5	SUPERIOR HOSPITALITY GROUP LLC 9168 BALMORAL MEWS SQ WINDERMERE FL 34786	B	HOS	CHE			300.00
05/31/2018 / / M 5	JEPHTA "JEFF" HOLNESS 3887 N W 122 TERR SUNRISE, FL 33323	LOA	ED/BUS	CHEE			500.00
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18 JUN 11 PM 2:43
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name JEPHTHA "JEFF" HOLNESS

(2) I.D. Number _____

(3) Cover Period 05/01/2018 / _____ through 05/31/2018 / _____

(4) Page 1 of 1

(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					
05/31/2018 / M1	SUNTRUST BANK 12396 W SUNRISE BLVD PLANTATION FL 33323	BANK CHARGES	MON		3.00
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18 JUN 11 PM 2:43
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name JEPHTHA"JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 05/01/2018 / _____ through 05/31/2018 / _____ (4) Page 1 of 1

(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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
(6) Sequence Number						
/ /	NONE	NONE	0		0	N
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18 JUN 11 PM 2:43
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JEPHTHA "JEFF" HOLNESS

Name

(2) 3887 N W 122ND TER

Address (number and street)

SUNRISE, FL, 33323

City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

18 MAY - 9 PM 3: 16
CITY CLERK
CITY OF SUNRISE

(4) Check appropriate box(es):

Candidate Office Sought: CITY OF SUNRISE COMMISSION GROUP C

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 04/01/2018 To 04/30/2018 Report Type: M 4

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ 0 , , .

Loans \$ 100 , 00 , .

Total Monetary \$ 100 , 00 , .

In-Kind \$ 0 , , .

(7) Expenditures This Report

Monetary Expenditures \$ 0 , , .

Transfers to Office Account \$ 0 , , .

Total Monetary \$ 0 , , .

(8) Other Distributions

\$ 0 , , .

(9) TOTAL Monetary Contributions To Date

\$ 100.00 , , .

(10) TOTAL Monetary Expenditures To Date

\$ 0 , , .

(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) SYDNEY W. CORBIN

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

X 
Signature

(Type name) JEPHTHA "JEFF" HOLNESS

Candidate Chairperson (only for PC and PTY)

X 
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 04/01/2018 / _____ / _____ through 04/30/2018 / _____ / _____ (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
04/09/2018 / / M 1	JEPHTHA JEFF HOLNESS 3887 NW 122 ND TER SUNRISE, FL 333223	LOA	ED/BUS OWN	CHE			100.00
/ /							
/ /							
/ /						18 MAY -9 PM 3: 16	CITY CLERK CITY OF SUNRISE
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CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name JEPHTHA "JEFF" HOLNESS (2) I.D. Number _____

(3) Cover Period 04/01/2018 / _____ through 04/30/2018 / _____ (4) Page 1 of 1

(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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
/ /	NONE	NONE	NONE		0	N
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18 MAY -9 PM 3: 16
 CITY CLERK
 CITY OF SUNRISE

CITY CLERK
CITY OF SUNRISE

18 JUN 22 AM 9:30

**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 officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Jeptha L. Holness

3. Address (include post office box or street, city, state, zip code)

3887 NW 122 Terrace
Sunrise, FL 33323

4. Telephone

(954) 600-4033

5. E-mail address

jeffholness@yahoo.com

6. Office sought (include district, circuit, group number)

City of Sunrise Commission
Group C

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan 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.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Jeptha "Jeff" Holness

11. Mailing Address

3887 NW 122 Terrace

12. Telephone

(954) 600-4033

13. City

Sunrise

14. County

Broward

15. State

FL

16. Zip Code

33323

17. E-mail address

jeffholness@yahoo.com

18. I have designated the following bank as my

Primary Depository Secondary Depository

19. Name of Bank

Suntrust

20. Address

12396 Sunrise Blvd

21. City

Sunrise

22. County

Broward

23. State

Florida

24. Zip Code

33323

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

6/22/18

26. Signature of Candidate

X

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Jeptha "Jeff" Holness, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

6/22/18
Date

X

Signature of Campaign Treasurer or Deputy Treasurer

CITY CLERK
CITY OF SUNRISE

18 APR -5 AM 9:42

**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 officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

Initial Filing of Form Re-filing to Change: Treasurer/Deputy Depository Office Party

2. Name of Candidate (in this order: First, Middle, Last)

Jeptha "Jeff" L. Holness

3. Address (include post office box or street, city, state, zip code)

3887 NW 122 Terr
Sunrise, FL 33323

4. Telephone

(954) 600-4033

5. E-mail address

jeffholness@yahoo.com

6. Office sought (include district, circuit, group number)

City of Sunrise
Commissioner Group C

7. If a candidate for a nonpartisan office, check if applicable:

My intent is to run as a Write-In candidate.

8. If a candidate for a partisan 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.

9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

Sydney W. Corbin

11. Mailing Address

7930 N.W. 5th Ct

12. Telephone

(954) 605-6515

13. City

PLANTATION

14. County

Broward

15. State

FL

16. Zip Code

33324

17. E-mail address

SWCORBIN@GMAIL.COM

18. I have designated the following bank as my Primary Depository Secondary Depository

19. Name of Bank

Sun trust

20. Address

12396 Sunrise Blvd

21. City

SUNRISE

22. County

Broward

23. State

Florida

24. Zip Code

33323

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

04/04/18

26. Signature of Candidate

X

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, Sydney W. Corbin, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

4/4/18
Date

X

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)
(Please print or type)

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
18 APR -5 AM 9:42

I, Jeptha "Jeff" L. Holness
candidate for the office of Commission Group C, City of Sunrise
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

~~X~~ 
Signature of Candidate

04/04/18
Date

Each candidate must file a statement with the qualifying officer within 10 days after the 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).

CITY CLERK
CITY OF SUNRISE

18 JUN 22 AM 9:30



NOTICE OF CANDIDACY AND AFFIDAVIT

I, Septha "Jeff" Holness, do hereby affirm that I am a candidate for the office of Commissioner, Group C City of Sunrise, in Broward County, Florida, in the General Election to be held on November 6, 2018, that I am qualified to serve in said office and will serve if elected; and that I am an elector of the City of Sunrise who has resided continuously within the City of Sunrise, Broward County, Florida, for a period of one (1) year prior to qualifying as a candidate for Commissioner.

[Handwritten Signature] Signature
6/22/18 Date

STATE OF FLORIDA
COUNTY OF BROWARD
CITY OF SUNRISE

The foregoing instrument was sworn to (or affirmed) and subscribed before me this 22 day of June, 2018, by Septha Holness.

[Handwritten Signature]
Notary Public



FELICIAN BRAVO
MY COMMISSION # GG 046087
EXPIRES: February 11, 2021
Bonded Thru Budget Notary Services

(seal)

Personally Known _____ OR Produced Identification X
Type of Identification Produced FLDL

City Charter Section 3.02 Qualifications.

Any elector of the City of Sunrise who has resided continuously in the city for one (1) year prior to qualifying as a candidate for the office shall be eligible to hold the office of City Commissioner, or Mayor.

(Ord. No. 517, § 3, 8-10-10/Ref. of 11-2-10)

**CANDIDATE OATH -
NONPARTISAN OFFICE**

CITY CLERK
CITY OF SUNRISE

18 JUN 22 AM 9:30

(Do not use this form if a Judicial or School Board Candidate)

Check box **only** if you are seeking to qualify as a write-in candidate:

Write-in candidate

OFFICE USE ONLY

Candidate Oath

(Section 99.021(1)(a), Florida Statutes)

I, Jeff Holness

(Print name above as you wish it to appear on the ballot. If your last name consists of two or more names but has no hyphen, check box . (See page 2 - Compound Last Names). No change can be made after the end of qualifying. Although a write-in candidate's name is not printed on the ballot, the name must be printed above for oath purposes.)

am a candidate for the nonpartisan office of Commissioner, City of Sunrise
(Office) (District #)

C; I am a qualified elector of Broward County, Florida;
(Circuit #) (Group or Seat #)

I am qualified under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected; I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes; and I will support the Constitution of the United States and the Constitution of the State of Florida.

Candidate's Florida Voter Registration Number (located on your voter information card): 117126331

Phonetic spelling for audio ballot: Print name phonetically on the line below as you wish it to be pronounced on the audio ballot as may be used by persons with disabilities (see instructions on page 2 of this form): [Not applicable to write-in candidates.]

Jeff Holness 954 600 -4033 jeffholness@yahoo.com
Signature of Candidate Telephone Number Email Address
3887 NW 122 Terrace Sunrise FL 33323
Address City State ZIP Code

STATE OF FLORIDA

COUNTY OF Broward

Felicia M Bravo
Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public below

Sworn to (or affirmed) and subscribed before me this 22
day of June, 20 18.

Personally Known: _____ or Produced Identification: X

Type of Identification Produced: 3 7 9 4



FELICIA M BRAVO
MY COMMISSION # GG 048087
EXPIRES: February 11, 2021
Bonded thru Budget Notary Services

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2017

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME:

Holness Jephtha L

MAILING ADDRESS:

3887 NW 122 Terrace

Sunrise 33323 Broward

CITY: ZIP: COUNTY:

NAME OF AGENCY:

City of Sunrise

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

City of Sunrise Commission, Group C

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

18 JUN 22 AM 9:30

CITY CLERK
CITY OF SUNRISE

**** **BOTH PARTS OF THIS SECTION MUST BE COMPLETED** ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one):

DECEMBER 31, 2017 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Kumen Math, Reading ctr.	1317 N University Dr. coralsprings	Education

PART B -- SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A	N/A	N/A	N/A

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]

(If you have nothing to report, write "none" or "n/a")

14728 NW 268 th / Okeechobee County Lot
15031 NW 262 nd / Okeechobee County Lot
16536 NW 268 th / Okeechobee County Lot

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

30+ Acres Property - Memorial Dr / Valerie St Highland County.

PART D — INTANGIBLE PERSONAL PROPERTY (Stocks, bonds, certificates of deposit, etc. - See instructions)
 (If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
Annuity - Prudential	Prudential

PART E — LIABILITIES (Major debts - See instructions)
 (If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
Nelnet	P.O. Box 82561 Lincoln, NE 68501

PART F — INTERESTS IN SPECIFIED BUSINESSES (Ownership or positions in certain types of businesses - See instructions)
 (If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	ADDRESS OF BUSINESS ENTITY	
PRINCIPAL BUSINESS ACTIVITY	N/A	N/A
POSITION HELD WITH ENTITY		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS		
NATURE OF MY OWNERSHIP INTEREST		

PART G — TRAINING

For elected municipal officers required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

Signature:



Date Signed:

6/22/18

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format) and send it to CEForm1@leg.state.fl.us. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: *Initially*, each local officer/employee, state officer, and specified state employee must file *within 30 days* of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2017.

CITY CLERK
CITY OF SUNRISE

18 JUN 22 AM 9:30




NOTICE OF LOGIC AND ACCURACY TEST

F.S. 101.5612 Testing of tabulating equipment.

Notice is hereby given that the pre-election Logic and Accuracy test for the automatic tabulating equipment for the 2018 Primary and General Elections will take place as listed below. *Attendance at this test of the equipment is strictly optional.* You are welcome to observe.

VOTING EQUIPMENT CENTER
1501 NW 40 AVENUE
LAUDERHILL, FL
(954)712-1903

For Primary Election	Wednesday, August 8, 2018	10:00 a.m.
For General Election	Wednesday, October 17, 2018	10:00 a.m.



Signature of Candidate



Date

CITY CLERK
CITY OF SUNRISE

18 JUN 22 AM 9:30

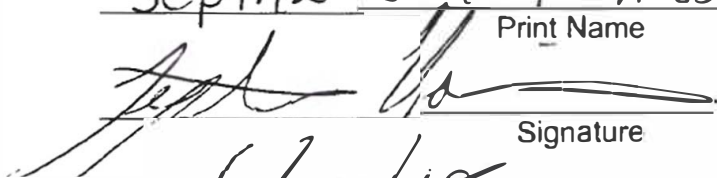


**Receipt of
Sunrise Code of Ethics and
Sunshine Amendment and Code of Ethics for
Public Officers and Employees
Acknowledgement**

I have received, read and understand the City of Sunrise Code of Ordinances, Chapter 10, Article II, Code of Ethics and the Sunshine Amendment and Code of Ethics for Public Officers and Employees.

Jeptha "Jeff" Holness

Print Name



Signature

6/22/18

Date

Broward County Statement of Ethical Campaign Practices

The Broward County Ethical Campaign Practices Act shall apply to any candidate for elected public office whose constituency resides, in whole or in part, within Broward County, or when the boundaries of the public office sought are located, in whole or in part, within the County. "Candidate" means any person to whom any one or more of the following applies:

- (1) Any person who seeks to qualify for nomination or election by means of the petitioning process;
- (2) Any person who seeks to qualify for election as a write-in candidate;
- (3) Any person who receives contributions or makes expenditures, with a view to bringing about his or her nomination or election to, or retention in, public office;
- (4) Any person who appoints a treasurer and designates a primary depository; or
- (5) Any person who files qualification papers and subscribes to a candidate's oath as required by law.

A candidate's decision regarding whether to execute the statement is strictly voluntary. A candidate executing the Statement of Ethical Campaign Practices shall file the original and a copy of the executed statement, bearing the candidate's signature, with the officer before whom the candidate qualifies within five (5) days after becoming a candidate for the elected public office.

As a candidate for public office in Broward County, I believe that political issues can be freely debated without appealing to racial, ethnic, religious, sexual, or other prejudices. I recognize that such negative appeals serve only to divide this community and create long-term moral, social, and economic problems. Therefore:

1. I shall not make my race, color, religion, gender, national origin, physical disability, or sexual orientation an issue in my campaign.
2. I shall not make my opponent's race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation an issue in my campaign.
3. I will condemn any appeal to prejudice based on race, color, religion, gender, national origin, age, marital status, familial status, physical disability, or sexual orientation.
4. I shall not attack or question my opponent's patriotism.
5. I shall not publish, display, or circulate any anonymous campaign literature or political advertisement nor shall I tolerate or permit members of my campaign organization to engage in such activities.
6. I shall not tolerate nor permit members of my campaign organization to engage in activities designed to destroy or remove campaign materials or signs lawfully displayed on public or private property.
7. I shall not tolerate my supporters engaging in these activities which I condemn nor shall I accept their continued support if they engage in such activities. I will not permit any member of my campaign organization to engage in these activities and will immediately and publicly repudiate the support of any other individual or group which resorts to the methods and tactics that I hereby condemn.
8. I shall run a positive campaign emphasizing my qualifications for office and my positions on issues of public concerns and I will limit my attacks on an opponent to legitimate challenges to that person's record, qualifications, and positions.
9. I will neither use nor permit the use of malicious untruths or innuendoes about an opponent's personal life, nor will I make or condone unfounded accusations discrediting an opponent's credibility.
10. I will not use or permit the use of campaign material that falsifies, distorts, or misrepresents facts.

Executed on this day 22 of June, 2018

WITNESSES:

BY CANDIDATE:

[Handwritten signatures of witnesses]

[Handwritten signature of candidate]
 Signature
Jeptha "Jeff" Holness
 (Print Name)

STATE OF FLORIDA)
) SS.
 COUNTY OF Broward)

The foregoing instrument was acknowledged before me this 22 day of June, 2018, by Jeptha Holness who is personally known to me or who has produced [redacted] as identification and who did/did not take an oath.

WITNESS my hand and official seal this 22 day of June, 2018.

(NOTARY SEAL)

[Handwritten signature of notary]
 (Signature of person taking acknowledgment)

FELICIA M BRAVO
 (Name of officer taking acknowledgment)
 typed, printed, or stamped

My commission expires:



FELICIA M BRAVO
 MY COMMISSION # GG 046087
 EXPIRES: February 11, 2021
 Bonded Thru Budget Notary Services

18 JUN 22 AM 9:30

CITY CLERK
CITY OF SUNRISE