

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

OFFICE USE ONLY

12 NOV 14 AM 11:44
CITY OF SUNRISE
CITY CLERK

(1) John Fosaro
Name

(2) 11360 W.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED (3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 11 / 2 / 12 To 11 / 19 / 12 Report Type TR

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 56.37

Transfers to Office Account \$ 0

Total Monetary \$ 56.37

(8) Other Distributions \$ 0

(9) TOTAL Monetary Contributions To Date
\$ 7783.61

(10) TOTAL Monetary Expenditures To Date
\$ 7783.61

(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) John Fosaro

Individual (only for electioneering comm.) Treasurer Deputy Treasurer

X _____
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fosaro

Candidate Chairperson (only for PC, PTY & electioneering comm. organization)

X _____
Signature

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

OFFICE USE ONLY

12 NOV 13 PM 12:16
CITY CLERK
CITY OF SUNRISE

(1) John Fusaro
Name
(2) 11360 N.W. 41st St.
Address (number and street)
Sunrise, Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): _____

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 11 / 2 / 12 To 11 / 13 / 12 Report Type TR

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 21.33

Transfers to Office Account \$ —

Total Monetary \$ 21.33

(8) Other Distributions \$ 35.04

(9) TOTAL Monetary Contributions To Date
\$ 7722.30

(10) TOTAL Monetary Expenditures To Date
\$ 7767.28 ~~7767.28~~

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John FUSARO

(2) I.D. Number TR

(3) Cover Period 11 / 2 / 12 through 11 / 12 / 12

(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
11/06/12	John Facebook.com	Advertisement	Debit Cash		21.33
01					
11/13/12	John Fusaro 11360 n.w. 41st st. Sunrise, Fl. 33323	Repayment of loan	Cash		35.04
02					
//					
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//					

CITY CLERK
 CITY OF SUNRISE
 12 NOV 13 PM 12:16

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

(1) John Fusaro
Name
(2) 11360 N.W. 41st St.
Address (number and street)
Sunrise Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

2 NOV 14 AM 11:44
CITY CLERK
CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED (3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): Sunrise Commission Group A
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous 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: From 10 / 13 / 12 To 11 / 1 / 12 Report Type 64
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 100.00
 Loans \$ ~~10~~
 Total Monetary \$ 100.00
 In-Kind \$ —

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 190.23
 Transfers to Office Account \$ 0
 Total Monetary \$ 190.23

(8) Other Distributions
 \$ 0

(9) TOTAL Monetary Contributions To Date
 \$ 7783.61

(10) TOTAL Monetary Expenditures To Date
 \$ 7727.24

(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) John Fusaro
 Individual (only for electioneering comm.) Treasurer Deputy Treasurer
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering comm. organization)
 Signature

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

OFFICE USE ONLY
12 NOV 2 AM 11:39

CITY CLERK
CITY OF SUNRISE

12 NOV 2 AM 11:40

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City of Sunrise Commission Group A

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 13 / 12 To 11 / 1 / 12 Report Type G4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ \$100.00

Loans \$ —

Total Monetary \$ \$100.00

In-Kind \$ —

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 190.23

Transfers to Office Account \$ —

Total Monetary \$ 190.23

(8) Other Distributions

\$ —

(9) TOTAL Monetary Contributions To Date

\$ 7722.30

(10) TOTAL Monetary Expenditures To Date

\$ 7710.91

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

(Type name) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Joh Fus
Signature

X Joh Fus
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro (2) I.D. Number 64
 (3) Cover Period 10/13/12 through 11/1/12 (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					
10/15/12	Scuottos Pizza	Campaign Meeting	Debit		\$25.39
1					
10/22/12	University Vale	Gas	Debit		\$7.36
2					
10/23/12	U-Haul	Truck Rental	Debit		\$44.21
3					
10/25/12	Facebook	Campaign Ad	Debit		\$28.61
4					
10/29/12	Stamps.com	Stamps	Debit		\$15.99
5					
10/30/12	mimmo Daily	Campaign Meeting	Debit		\$27.53
6					
10/30/12	Facebook	Campaign Ad	Debit		\$26.20
7					
10/31/12	Monthly Fee Region	Monthly Fee	Debit		\$15.00
8					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number 64

(3) Cover Period 10 / 13 / 12 through 11 / 1 / 12 (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
10 / 16 / 12	Bryon Davis 2661 S.W. 87 th Dr. Davie, Fl. 33323	I	Police officer Captain	CHE			100.00
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CITY CLERK
 CITY OF SUNRISE
 12 NOV -2 AM 11:40

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

12 NOV 14 AM 11:44
CITY CLERK
CITY OF SUNRISE

OFFICE USE ONLY

(1) John Fusaro
Name
(2) 11360 N.W. 41st St.
Address (number and street)
Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Sunrise Commission Group A
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous 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: From 09 / 29 / 12 To 10 / 12 / 12 Report Type G3
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ —
 Loans \$ 100.00
 Total Monetary \$ 100.00
 In-Kind \$ —

(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
 \$ 7683.61

(10) TOTAL Monetary Expenditures To Date
 \$ 7537.01

(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) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
 Signature

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

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise, Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee

Committee of Continuous Existence

Party Executive Committee

Electioneering Communication

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

12 OCT 19 PM 2:02
CITY CLERK
CITY OF SUNRISE

(5) REPORT IDENTIFIERS

Cover Period: From 09/29/12 To 10/12/12 Report Type G3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$

Loans \$ 100.00

Total Monetary \$ 100.00

In-Kind \$

(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

\$ 7622.30

(10) TOTAL Monetary Expenditures To Date

\$ 7520.68

(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) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X John Fusaro
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X John Fusaro
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 09/29/12 through 10/12/12

(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					
/ /	Nothing to Report				
/ /					
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CITY CLERK
 CITY OF SUNRISE
 12 OCT 19 PM 2:02

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fosaro (2) I.D. Number _____

(3) Cover Period 09 / 29 / 12 through 10 / 12 / 12 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code						
10, 09, 12	John Fosaro 11360 N.W. 41 st Sunrise, Fl. 33323		Candidate	Loan			\$100.00
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12 OCT 19 PM 2:02
 CITY CLERK
 CITY OF SUNRISE

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

OFFICE USE ONLY

12 NOV 14 AM 11:44

CITY CLERK
CITY OF SUNRISE

(1) John Fusaro
Name

(2) 11360 n.w. 41st St.
Address (number and street)
Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Sunrise Commission Group A
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous 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: From 09/15/12 To 09/28/12 Report Type 62

- Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 30.99

Transfers to Office Account \$ -

Total Monetary \$ -

(8) Other Distributions \$ -

(9) TOTAL Monetary Contributions To Date
\$ 7583.61

(10) TOTAL Monetary Expenditures To Date
\$ 7537.01

(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) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X
Signature

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

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

12 OCT -5 PM 2:06

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous Existence CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 9 / 15 / 12 To 9 / 28 / 12 Report Type G2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ —

Loans \$ —

Total Monetary \$ —

In-Kind \$ —

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 30.99

Transfers to Office Account \$ —

Total Monetary \$ 30.99

(8) Other Distributions

\$ —

(9) TOTAL Monetary Contributions To Date

\$ 7,522.30

(10) TOTAL Monetary Expenditures To Date

\$ 7520.68

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 09 / 15 / 12 through 09 / 28 / 12

(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
/ /	NO	Activity					
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CITY CLERK
 CITY OF SUNRISE
 12 OCT -5 PM 2:06

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 9/15/12 through 9/28/12

(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					
9/27/12	Stamps.com 12939 Coral Tree Pl. Los Angeles, CA 90066	Stamps	Debit		15 ⁹⁹
001					
9/28/12	Regions Bank 10001 W. Oakland Park Blvd. Sunrise, FL 33351	Account Fee	Debit		15 ⁰⁰
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CITY CLERK
 CITY OF SUNRISE
 12 OCT -5 PM 2:06

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

CITY CLERK
CITY OF SUNRISE
12 NOV 14 AM 11:44

OFFICE USE ONLY

(1) John Fusaro
Name
(2) 11360 n.w. 41st St.
Address (number and street)
Sunrise FL 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Sunrise Commission Group A
- Political Committee CHECK IF PC HAS DISBANDED
- Committee of Continuous 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: From 08 / 10 / 12 To 09 / 14 / 12 Report Type G1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 77.97

Transfers to Office Account \$ 0

Total Monetary \$ 77.97

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 7583.61

(10) TOTAL Monetary Expenditures To Date

\$ 7506.02

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

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

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
12 SEP 21 PM 12:40

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 8 / 10 / 12 To 9 / 14 / 12 Report Type G1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ —

Loans \$ —

Total Monetary \$ —

In-Kind \$ —

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 31.92

Transfers to Office Account \$ —

Total Monetary \$ 31.92

(8) Other Distributions \$ —

(9) TOTAL Monetary Contributions To Date

\$ 7,522.30

(10) TOTAL Monetary Expenditures To Date

\$ 7,489.69

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number G 1

(3) Cover Period 8 / 10 / 12 through 9 / 14 / 12

(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					
9/14/12 001	Scuottos Pizza	Campaign Meeting	Mon		31.92
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CITY CLERK
 CITY OF SUNRISE
 12 SEP 21 PM 12:40

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number G1

(3) Cover Period 8 / 10 / 12 through 9 / 14 / 12 (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
/ /							
	Nothing to Report						
/ /							
						12 SEP 21 PM 12:41	CITY CLERK CITY OF SUNRISE
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY

12 NOV 14 AM 11:43
CITY CLERK
CITY OF SUNRISE

(1) John Fusaro
Name
(2) 11360 N.W. 41st St.
Address (number and street)
Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 01 / 10 To 12 / 31 / 10 Report Type 4Q

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 352.31

Loans \$ 450.00

Total Monetary \$ 852.31

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 523.49

Transfers to Office Account \$ 0

Total Monetary \$ 523.49

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 852.31

(10) TOTAL Monetary Expenditures To Date

\$ 523.49

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

[Signature]
Signature

[Signature]
Signature

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE
10 OCT - 8 PM 11:11

Fusaro, John Tomas

Candidate's Name (Last, Suffix, First, Middle)
OR Political Committee, CCE or Party Name

Identification Number (Assigned by Division
of Elections)

11360 N.W. 41st St.

Address (Number and Street)

Commissioners Group A

Office Sought (Include District, Circuit or
Group Number)

Sunrise

City

Fl.

State

33323

Zip Code

Candidate

Committee of Continuous
Existence

Check box if address has changed since last
report.

Political Committee

Party Executive Committee

Check here if PC or CCE has DISBANDED
and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

January

April

July

October

PRIMARY ELECTION

32nd day prior

18th day prior

4th day prior

GENERAL ELECTION

46th day prior

32nd day prior

18th day prior

4th day prior

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

7-1-10 through 9-30-10

X

[Signature]
Signature

10-8-10
Date

SIGNATURES REQUIRED FOR:

Candidates

Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees

Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Committees of Continuous Existence

Treasurer (s. 106.04(4)(c), F.S.)

Party Executive Committees

Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

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

CITY CLERK
CITY OF SUNRISE
11 APR -6 AM 11:38

(1) John Fusaro
Name
(2) 11360 N.W. 41st St.
Address (number and street)
Sunrise, Fl. 33323
City, State, Zip Code

OFFICE USE ONLY
(3) ID Number: _____

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):
 Candidate (office sought): Sunrise Commissioner Group A
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous 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: From 10 / 01 / 10 To 12 / 31 / 10 Report Type Q4
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 603.09
 Loans \$ 300.00
 Total Monetary \$ 903.09
 In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 523.49
 Transfers to Office Account \$ _____
 Total Monetary \$ _____

(8) Other Distributions
 \$ _____

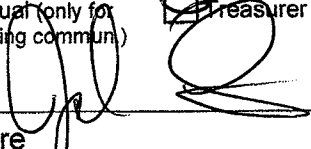
(9) TOTAL Monetary Contributions To Date
 \$ 903.09

(10) TOTAL Monetary Expenditures To Date
 \$ 523.49

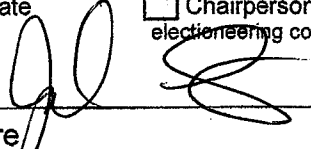
(11) CERTIFICATION

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) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 10 / 01 / 10 through 12 / 31 / 10 (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		Type	Occupation	Type	Description		Amount
10 / 22 / 10 1	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	I	Manager	Loan			100.00
11 / 5 / 10 2	Regions Bank 10001 W Oakland Park Blvd Sunrise, Fl. 33351	B	Bank	Ref			53.37
11 / 22 / 10 3	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	I	Manager	Loan			200.00
11 / 29 / 10 4	Bill Sorrells 4359 S.W. 66 th Loop Ocala, Fl. 34481	I	retired	Cash			50.00
12 / 01 / 10 5	Pay Pal San Jose, CA.	B	Bank	Cash Account verification		Del	.31
12 / 05 / 10 6	Clankson P.O. Box 161 Rising Sun, Md. 21911	I	Housewife	Cash			16.00
12 / 05 / 10 7	Lewis Mentz 1790 W. 44 th St. #210 Hialeah, Fl. 33012	I	Attorney	Check			\$250.00
12 / 05 / 10 8	Chilson 224 Main St. South Stillwater, MN 55082	I	Housewife	Cash			16.00

11 APR - 6 AM 11:38
CITY OF SUNRISE
CITY CLERK

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 10 / 01 / 10 through 12 / 31 / 10 (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
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
12 / 05 / 10	McClung 526 Logan Ave FL. 2 Bronx, N. Y. 10465	I	Housewife	Cash			\$19.00
9							
12 / 06 / 10	Daniel Fusaro 620 N.W. 191 st St. N. Miami, FL. 33169	I	Occupational Therapist	check			\$100.00
10							
12 / 06 / 10	John Fusaro 21861 S. Heritage Circle Pembroke Pines, FL. 33029	I	Manager	check			\$50.00
11							
12 / 12 / 10	Burk 316 Millspaugh St. #J52 San Angelo, TX 76901	I	Housewife	Cash			16.00
12							
12 / 17 / 10	John Fusaro 11360 N.W. 41 st St. Sunrise, FL. 33323	I	Manager	Loan		Del	18.15
13							
12 / 01 / 10	Pay Pal San Jose, CA	B	Cash	Cash		ADD	.19
14							
12 / 01 / 10	Pay Pal San Jose, CA	B	Cash	Cash		ADD	.12
15							
12 / 13 / 10	Moyn 7704 N.E 219 th Ave Melrose, FL. 32666	I	Housewife	Cash		ADD	18.15
14							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 10 / 01 / 10 through 12 / 31 / 10 (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							
12 / 21 / 10	Thomas P.O. Box 622 Monument, Co 80132	I	Business	Cash		ADD	14.26
15							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

11 APR -6 AM 11:38
 CITY CLERK
 CITY OF SUNRISE

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

(1) John Tomas Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise, Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City Commission Group A

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

OFFICE USE ONLY

11 JAN 10 AM 11:29
CITY CLERK
CITY OF SUNRISE

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 01 / 10 To 12 / 31 / 10 Report Type Q4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 570.68

Loans \$ 318.15

Total Monetary \$ _____

In-Kind \$ 888.83

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 523.49

Transfers to Office Account \$ _____

Total Monetary \$ 523.49

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 888.83

(10) TOTAL Monetary Expenditures To Date

\$ 523.49

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

Signature

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 10 through 12 / 31 / 10

(4) Page 1 of 2

(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
11/05/10 1	Regions Bank 10001 W. Oakland Park Blvd. Sunrise, Fl. 33351	CHK.	MON		53.37
11/12/10 2	AT & T Wireless Atlanta, Ga.	Campaign Phone	MON		30.74
11/26/10 3	Restaurant.com P.O. Box #69 Elk Grove Village, IL 60009	Fundraiser	MON		160.00
12/01/10 4	Overnight Prints.com	Business Cards	MON		24.20
12/17/10 5	Blue Cotton.com P.O. Box 51882 Bowling Green, KY 42102	T-Shirts	MON		110.56
12/20/10 6	National Pen 342 Shelbyville Mills Rd. Shelbyville, TN 37162	Pens	MON		65.90
12/20/10 7	Blue Cotton.com P.O. Box 51882 Bowling Green, KY 42102	T-Shirt	MON		27.95
12/20/10 8	Vista Prints 95 Hayden Avenue Lexington, MA 02421	Letterhead	MON		26.79

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 10 through 12 / 31 / 10

(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		Amount
10 / 22 / 10	John Fusaro 11360 N.W. 41st St. Sunrise, Fl. 33323	I	Manager	Loan			\$100.00
1							
11 / 5 / 10	Regions Bank 10001 W. Oakland Park Blvd. Sunrise, Fl. 33351	B		Ref			\$53.37
2							
11 / 22 / 10	John Fusaro 11360 N.W. 41st St. Sunrise, Fl. 33323	I	Manager	Loan			\$200.00
3							
11 / 29 / 10	Bill Sorrells 9359 S.W. 66th Loop Ocala, Fl. 34481	I	Retiral.	Cash			\$50.00
4							
12 / 01 / 10	Pay Pal San Jose, California	B		Cash Account Verification			.31
5							
12 / 5 / 10	Clarkson P.O. Box 161 Rising Sun, MD 21911	I	Housewife	Cash			16.00
6							
12 / 5 / 10	Lewis Martz 1790 W. 49th St. #210 Hialeah, Fl. 33012	I	Att.	Check			\$250.00
7							
12 / 5 / 10	Chilson 224 Main St. S. Stillwater, MN. 55082	I	Housewife	Cash			\$16.00
8							

11 JAN 10 AM 11:30
 CITY OF SUNRISE
 CITY CLERK

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 10 / 01 / 10 through 12 / 31 / 10 (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
12, 5, 10	McClung 526 Logan Ave. Fl. 2 Bronx, N.Y. 10465	I	Housewife	Cash			\$ 19.00
9							
12, 06, 10	Daniel Fusaro 620 N.W. 19th St. N. Miami, Fl. 33169	I	Occupational therapist	Check			\$ 100.00
10							
12, 10, 10	John Fusaro 21861 S. Heritage Circle Pembroke Pines, Fl. 33029	I	Manager	Check			\$ 50.00
11							
12, 12, 10	Bueck 316 Millspaugh St. #J52 San Angelo, TX 76901	I	Housewife	Mon			\$ 16.00
12							
12, 17, 10	John Fusaro 11360 N.W. 41st St. Sunrise, Fl. 33323	I	Manager	Loan			18.15
13							
1							
1							
1							
1							

11 JAN 10 AM 11:30
 CITY CLERK
 CITY OF SUNRISE

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

CITY CLERK
CITY OF SUNRISE
12 NOV 14 AM 11:43

OFFICE USE ONLY

(1) John Fusaro
Name
(2) 11360 N.W. 41st St.
Address (number and street)
Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): Sunrise Commission Group A
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous 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: From 01 / 11 / 11 To 03 / 31 / 11 Report Type 1Q
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1012.32
 Loans \$ 200.00
 Total Monetary \$ 1212.32
 In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 915.40
 Transfers to Office Account \$ 0
 Total Monetary \$ 915.40

(8) Other Distributions
 \$ 0

(9) TOTAL Monetary Contributions To Date
 \$ 2064.63

(10) TOTAL Monetary Expenditures To Date
 \$ 1438.89

(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) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

[Signature]
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

[Signature]
 Signature

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

12 NOV 14 AM 11:44

CITY CLERK
CITY OF SUNRISE

(1) John Fusaro
Name
(2) 11360 N.W. 41st St.
Address (number and street)
Sunrise Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): Sunrise Commission Group A
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous 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: From 01 / 01 / 12 To 03 / 31 / 12 Report Type Q1
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 601.46
 Loans \$ 0
 Total Monetary \$ 601.46
 In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 762.26
 Transfers to Office Account \$ 0
 Total Monetary \$ 762.26

(8) Other Distributions
 \$ 0

(9) TOTAL Monetary Contributions To Date
 \$ 4470.09

(10) TOTAL Monetary Expenditures To Date
 \$ 4331.19

(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) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer
X [Signature]
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
X [Signature]
 Signature

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

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

12 NOV 14 AM 11:44
CITY CLERK
CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 07/27/12 To 08/09/12 Report Type F2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 0

Total Monetary \$ 0

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 30.99

Transfers to Office Account \$ 0

Total Monetary \$ 30.99

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 7583.61

(10) TOTAL Monetary Expenditures To Date

\$ 7428.05

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X _____
Signature

X _____
Signature

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

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise FL 33323
City, State, Zip Code

OFFICE USE ONLY

12 AUG 10 AM 10:25
CITY CLERK
CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 7 / 21 / 12 To 8 / 9 / 12 Report Type F3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ —

Loans \$ —

Total Monetary \$ —

In-Kind \$ —

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 30.99

Transfers to Office Account \$ —

Total Monetary \$ 30.99

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 7,522.30

(10) TOTAL Monetary Expenditures To Date

\$ 7,457.77

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 07 / 21 / 12 through 08 / 9 / 12

(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							
/ /	Nothing to Report						
/ /							
/ /							
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12 AUG 10 AM 10:25
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 07/21/12 through 08/09/12

(4) Page 1 of 1

(5) Date	(6) Sequence Number	(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
07/27/12	1	Stamps.com 12959 Coral Tree Pl. Los Angeles, C.A. 90046	Stamps for Postage	Debit		15.99
07/31/12	2	Regions 10001 W. Oakland Blvd Sunrise, Fl. 33351	Account Fee	Debit		15.00
///						
///						
///						
///						
///						
///						

CITY CLERK
CITY OF SUNRISE
12 AUG 10 AM 10:25

WAIVER OF REPORT

(Section 106.07(7), F.S.)

(PLEASE TYPE)

CITY CLERK
CITY OF SUNRISE
12 JUL 27 AM 11:46

OFFICE USE ONLY

John Tomas Fusaro

Name

Group A, Sunrise Commission

Office Sought

11360 N.W. 41st St.

Address

Sunrise

City

FL.

State

33323

Zip Code



Candidate



Committee of Continuous Existence



Electioneering Communication Organization



Political Committee



Party Executive Committee



Check box if address has changed since last report.



Check here if PC, CCE, or ECO has DISBANDED and will no longer file reports.

TYPE OF REPORT (Check Appropriate Box)

QUARTERLY REPORTS

January

April

July

October

PRIMARY ELECTION

32nd day prior

18th day prior

4th day prior

GENERAL ELECTION

46th day prior

32nd day prior

18th day prior

4th day prior

TERMINATION REPORT

SPECIAL ELECTION

NOTIFICATION OF NO ACTIVITY IN CAMPAIGN ACCOUNT FOR THE REPORTING PERIOD OF

X

John Tomas Fusaro
Signature

Signature

THROUGH

7-07-12

7-20-12
07-27-12

Date

SIGNATURES REQUIRED FOR:

Candidates

Candidate, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Political Committees

Chairman, Campaign Treasurer or Deputy Treasurer (s. 106.07(5), F.S.)

Committees of Continuous Existence and Electioneering Communication Organizations

Treasurer (s. 106.04(4)(c), F.S.)

Party Executive Committees

Treasurer or Chairman (s. 106.29(2), F.S.)

In any reporting period when there has been no activity in the account (no funds expended or received) the filing of the required report is waived. However, the filing officer must be notified in writing on the prescribed reporting date that no report is being filed.

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

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

12 NOV 14 AM 11:44
CITY CLERK
CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 04/01/12 To 07/06/12 Report Type F1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 113.52

Loans \$ 3600.00

Total Monetary \$ 3113.52

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 3065.87

Transfers to Office Account \$ 0

Total Monetary \$ 3065.87

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 7583.61

(10) TOTAL Monetary Expenditures To Date

\$ 7397.06

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

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

OFFICE USE ONLY

(1) John Tomas Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise, Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City of Sunrise Commissioner Group A

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

12 JUL 13 PM 12:04
CITY CLERK
CITY OF SUNRISE

(5) REPORT IDENTIFIERS

Cover Period: From 04/01/2012 To 07/06/2012 Report Type F1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$

Loans \$ 3,000

Total Monetary \$ 3,000

In-Kind \$

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 2,959.88

Transfers to Office Account \$ _____

Total Monetary \$ 2959.88

(8) Other Distributions
\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 7,522.30

(10) TOTAL Monetary Expenditures To Date

\$ 7426.80

(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) John Tomas Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X [Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Tomas Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Tomas Fusaro (2) I.D. Number _____

(3) Cover Period 04 / 01 / 2012 through 07 / 06 / 12 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		Amount
05/31/12	John Tomas Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	Cash Cash	Consulting	Loan			1,400.00
001							
06/04/12	John Tomas Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	Cash	Consulting	Loan			1,400.00
002							
06/18/12	John Tomas Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	Cash	Consulting	LOAN			200.00
003							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

12 JUL 13 PM 12:04
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Tomas Fusaro

(2) I.D. Number _____

(3) Cover Period 04 / 01 / 2012 through 07 / 06 / 12

(4) Page 1 of 2

(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					
05/29/12 001	Stamps. Com 12459 Coral Tree Pl. Los Angeles, CA. 90066	Stamps	Debit		15.99
05/31/12 002	Regions Bank 10001 W. Oakland Park Blvd. Sunrise, FL. 33351	Monthly Fee	Debit		15.00
06/04/12 003	Facebook. com 1601 S. California Ave. Palo Alto, CA. 94304	Advertis.ing	Debit		2.60
06/07/12 004	Committee to Elect John Fusaro 11360 N.W. 41st St. Sunrise, FL. 33323	Qualifying Fee	check		2,752.56
06/11/12 005	Facebook. com 1601 S. California Ave. Palo Alto, CA. 94304	Advertising	Debit		18.82
06/18/12 006	Facebook. com 1601 S. California Ave. Palo Alto, CA. 94304	Advertising	Debit		12.44
06/22/12 007	Facebook. com 1601 S. California Ave. Palo Alto, CA. 94304	Advertising	Debit		7.77
06/27/12 008	Stamps. Com 12459 Coral Tree Pl. 12459 S. California Ave. Los Angeles CA. 90066 Palo Alto, CA. 94304	Stamps	Debit		15.99

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name John Tomas Fusaro

(2) I.D. Number _____

(3) Cover Period 04/01/12 through 07/06/12

(4) Page 2 of 2

(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
06/28/12	Facebook . com 1601 S. California Ave. Palo Alto, CA. 94304	Advertising	Debit		9.07
009					
06/29/12	Regions Bank 10001 West Oakland Park Blvd Sunrise, FL. 33351	Monthly fee	Debit		15.00
010					
07/02/12	Party City 12121 W. Sunrise Blvd. Plantation, FL. 33323	Parade Decorations	Debit		94.64
011					
/ /					
/ /					
/ /					
/ /					
/ /					

CITY CLERK
 CITY OF SUNRISE
 12 JUL 13 PM 12:04

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

12 APR - 9 AM 11:36
 CITY OF SUNRISE
 CITY CLERK

(1) John Fusaro
 Name
 (2) 11360 N.W. 41st St.
 Address (number and street)
Sunrise Fl. 33323
 City, State, Zip Code

OFFICE USE ONLY

(3) ID Number: _____

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):
 Candidate (office sought): Sunrise Commission Group A.
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous 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: From 01 / 01 / 12 To 3 / 31 / 12 Report Type 1st q.
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 519.21
 Loans \$ 100.00
 Total Monetary \$ 619.21
 In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 763.57
 Transfers to Office Account \$ 0
 Total Monetary \$ 763.57

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 4522.30

(10) TOTAL Monetary Expenditures To Date
 \$ 4466.92

(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) John Fusaro
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer
X
 Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
X
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 01/01/12 through 03/31/12 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
01/13/12	James Ale 2824 n.w. 99th Ter. Sunrise, Fl. 33322	I	Consulting	Consulting check			\$500.00
1							
01/17/12	Square In. San Fran, CA.	B	Processing Company	Cash			.49
2							
01/23/12	John Fusaro 11360 n.w. 41st St. Sunrise, Fl. 33323	I	Manager	Loan			\$100.00
3							
02/23/12	Steve Haft 4900 Cleveland St. Hollywood, Fl. 33021	I	Accountant	Debit Card			\$18.72
4							
1							
1							
1							
1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 01/01/12 through 03/31/12

(4) Page 1 of 2

(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					
01/12/12	Legends Tavern 10079 west Oakland Park Blvd. Sunrise, Fl. 33351	Campaign staff meeting	Food		29.39
1					
01/17/12	Square In. San Fran, Ca.	Account check verify	Debit.		.49
2					
01/19/12	James Ale 2824 n.w. 99th Terrace Sunrise, Fl. 33372	Returned check	Debit		\$500.00
3					
01/19/12	Regions Bank 10001 w. Oakland Park Blvd. Sunrise, Fl. 33351	Fee Rtn. Item	Debit		\$10.00
4					
01/25/12	Square In. San Fran, CA.	Fee	Debit		\$0.03
5					
01/27/12	Stamps.com	Postage	Card		\$15.99
6					
01/30/12	Regions Bank Signsonthecheap.com 11525B Stonehollow Dr. Austin, TX 78758	Campaign Signs	Card		\$129.41
7					
01/31/12	Regions 10001 w. Oakland Park Blvd. Sunrise, Fl. 33351	Fee	Debit		\$15.00
8					

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro (2) I.D. Number _____
 (3) Cover Period 01 / 01 / 12 through 03 / 31 / 12 (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
02/23/12	Pay Pal, Inc. San Jose, Ca.	Fee Deposit	Fee Debit		\$1.28
9					
02/27/12	Stamps. Com	Postage Fee	Card		\$15.99
10					
02/29/12	Regions 10001 W. Oakland Park Blvd. Sunrise, Fl. 33351	Fee Monthly	Debit		\$15.00
11					
03/27/12	Stamps. Com	Postage Fee	Card		\$15.99
12					
03/30/12	Regions 10001 W. Oakland Park Blvd. Sunrise, Fl. 33351	Monthly Fee	Debit		\$15.00
13					
11					
11					
11					

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

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

12 NOV 14 AM 11:44
CITY CLERK
CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 10 / 01 / 11 To 12 / 31 / 11 Report Type 4 a

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 304.00

Loans \$ 200.00

Total Monetary \$ 504.00

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 281.03

Transfers to Office Account \$ 0

Total Monetary \$ 281.03

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 3868.63

(10) TOTAL Monetary Expenditures To Date

\$ 3568.93

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X _____
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X _____
Signature

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

CITY CLERK
CITY OF SUNRISE

OFFICE USE ONLY
12 JAN 10 PM 4:37

(1) John Fusaro
Name

(2) 11360 W.W. 41st St.
Address (number and street)

Sunrise, FL 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 1 / 11 To 12 / 31 / 11 Report Type 4th q.

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 500.00

Total Monetary \$ 0

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 281.03

Transfers to Office Account \$ 0

Total Monetary \$ 281.96

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 3903.09

(10) TOTAL Monetary Expenditures To Date

\$ 3703.35

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

(Type name) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X
Signature

X
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 10 / 1 / 11 through 12 / 31 / 11 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
10 / 21 / 11	John Fusaro 11300 N.W. 41 st St. Sunrise, Fl. 33323	Loan		From Cash			200.00
1							
10 / 2 / 11	Regions Bank Sunrise, Fl. 33351	Direct Deposit		Refund of Fee			4.00
2							
12 / 20 / 11	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	Loan		Cash			300.00
3							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

12 JAN 10 PM 4:37
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 10/1/11 through 12/31/11

(4) Page 1 of 2

(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					
10/13/11	Facebook 1601 S. California Ave Palo Alto, Ca. 94304	Advertisement	Card		13.37
1					
10/19/11	Facebook 1601 S. California Ave, Palo Alto, Ca. 94304	Advertisement	Card		13.93
2					
10/24/11	AT & T Atlanta, Ga.	Phone	Card		134.06
3					
10/25/11	Facebook 1601 S. California Ave, Palo Alto, Ca. 94304	Advertisement	Card		11.33
4					
10/27/11	Stamps. Com	Stamps	Card		15.99
5					
10/31/11	Facebook. Com 1601 S. California Ave Palo Alto, Ca 94304	Advertisement	Card		7.47
6					
10/31/11	Regions Bank 10001 W. Oakland Park Blvd Sunrise, FL 33351	Fee	Debit		
7					
10/31/11	Monthly 10001 W. Oakland Park Blvd Regions Bank 33351	Fee Monthly	Fee		15.00
8					

12 JAN 10 PM 4:37
 CITY CLERK
 CITY OF SUNRISE
 5

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro (2) I.D. Number _____
 (3) Cover Period 10/1/11 through 12/31/11 (4) Page 2 of 2

(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					
11/07/11	Facebook. com 1601 S. California Ave Palo Alto, Ca. 94304	Ad	Card		3.96
9					
11/28/11	Stamps. com	postage	Card		15.99
10					
11/30/11	Regions 10001 W. Oakland Park Blvd Sunrise, FL 33351	Fee	Debit		15.00
11					
12/27/11	Stamps com	Postage	card		15.99
12					
12/30/11	Regions Bank 10001 W. Oakland Park Blvd Sunrise, FL 33351	Fee	Debit		15.00
13					
11					
11					
11					

12 JAN 10 PM 4:37
 CITY CLERK
 CITY OF SUNRISE

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

12
NOV 14 AM 11:44
CITY CLERK
CITY OF SUNRISE

OFFICE USE ONLY

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise Fl. 33323
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 07 / 1 / 11 To 09 / 30 / 11 Report Type 30

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 600.00

Loans \$ 100.00

Total Monetary \$ 700.00

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 981.96

Transfers to Office Account \$ 0

Total Monetary \$ 981.96

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 3364.63

(10) TOTAL Monetary Expenditures To Date

\$ 3287.90

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X _____
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X _____
Signature

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

CITY CLERK
CITY OF SUNRISE
OFFICE USE ONLY
11 OCT -6 AM 11:47

(1) John Fusaro

Name

(2) 11360 N.W. 41st St.

Address (number and street)

Sunrise Fl. 33323

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 07 / 01 / 11 To 09 / 30 / 11 Report Type 3Q

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 700.00

Total Monetary \$ 700.00

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 981.96

Transfers to Office Account \$ 0

Total Monetary \$ 981.96

(8) Other Distributions \$ 0

(9) TOTAL Monetary Contributions To Date

\$ 3403.09

(10) TOTAL Monetary Expenditures To Date

\$ 3421.39

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

(Type name) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X
Signature [Signature]

X
Signature [Signature]

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro

(2) I.D. Number 3Q

(3) Cover Period 07, 01, 11 through 09, 30, 11

(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, 17, 11	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	I	Manager	Loan			300.00
1							
08, 29, 11	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	I	Manager	Loan			300.00
2							
09, 19, 11	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	I	Manager	Loan			100.00
3							
1 1							
1 1							
1 1							
1 1							
1 1							

11 OCT -6 AM 11:47
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number 30

(3) Cover Period 07, 1, 11 through 9, 30, 11

(4) Page 1 of 2

(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					
07/05/11 1	Facebook.com 1601 S. California Ave. Palo Alto, CA. 94304	Advertisement	check Card		5.46
07/20/11 2	AT + T Atlanta, Ga.	Campaign Phone	check Card		134.31
07/27/11 3	Stamps.com 12959 Coral Tree Pl. Los Angeles, Ca 90066-7000	Stamps	check Card		15.99
07/29/11 4	Regions 10001 W. Oakland Park Blvd. Sunrise Fl. 33351	Monthly Fee	Debit		10.00
08/17/11 5	Internetguru40.com Fl. Lauderdale, FL 33322	Website Social Media	check		349.00
08/19/11 6	United States Parcel Service 475 L'Enfant Plaza S.W. Washington, D.C. 20260-3100	Stamps	check Card		10.00
08/29/11 7	Stamps.com 12959 Coral Tree Pl. Los Angeles, CA. 90066-7000	Stamps	check Card		15.99
08/30/11 8	AT + T Atlanta, GA.	Campaign Phone	check Card		134.22

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number 3 Q

(3) Cover Period 07 / 1 / 11 through 9 / 30 / 11

(4) Page 2 of 2

(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					
08/31/11	Regions 10001 w. Oakland Park Blvd Sunrise, Fl. 33351	Monthly Fee	Fee		10.00
9					
09/14/11	Sunrise Women's Club 10451 Sunrise Lakes Blvd. Sunrise, Fl. #206 33322	Advertisement	check		100.00
10					
09/14/11	Vista Print 95 Hayden Ave. Lexington, MA 02421	Campaign Material	check Card		25.54
11					
09/14/11	Vista Print 95 Hayden Ave. Lexington, MA 02421	Campaign Material	check Card		11.24
12					
09/19/11	AT & T Atlanta, Ga.	Campaign Phone	check Card		134.22
13					
09/27/11	Stamps.Com 12959 Cord Tree Pl. Los Angeles, Ca. 90066-7020	Stamps	check Card		15.99
14					
09/30/11	Regions 10001 w. Oakland Park Blvd. Sunrise, Fl. 33351	Monthly Fee	Debit		10.00
15					
11					

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

12 NOV 14 AM 11:44
CITY CLERK
CITY OF SUNRISE

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise, Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

(3) ID Number: _____

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 04 / 01 / 11 To 06 / 30 / 11 Report Type 2Q

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 500.00

Loans \$ 100.00

Total Monetary \$ 600.00

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 867.05

Transfers to Office Account \$ 0

Total Monetary \$ 867.05

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 2664.63

(10) TOTAL Monetary Expenditures To Date

\$ 2305.94

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

[Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

[Signature]
Signature

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

(1) John Fusaro
Name

(2) 11360 n.w. 41st St.
Address (number and street)

Sunrise, Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

11 JUL 11 PM 12:09
CITY OF EMMETT
CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): Sunrise Commission Group A
- Political Committee
- Committee of Continuous Existence
- Party Executive Committee
- Electioneering Communication

CHECK IF PC HAS DISBANDED

CHECK IF CCE HAS DISBANDED

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 4 / 1 / 11 To 06 / 30 / 11 Report Type R2

- Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 100

Loans \$ 500

Total Monetary \$ 600

In-Kind \$ 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 867.05

Transfers to Office Account \$ 0

Total Monetary \$ 867.05

(8) Other Distributions

\$ 0

(9) TOTAL Monetary Contributions To Date

\$ 2703.09

(10) TOTAL Monetary Expenditures To Date

\$ 2439.43

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

[Signature]
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 4 / 1 / 11 through 6 / 30 / 11 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
06/03/11 1	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	I		Loan			500.00
6/6/11 2	PGA Homes Inc. 517 SW. College Park Rd. Pt. Pierce, Fl. 34953	B	Roofing & Home Inspection	CHE			100.00
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

11 JUL 11 PM 12:10
CITY CLERK
CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name John FUSAKO

(2) I.D. Number _____

(3) Cover Period 4 / 1 / 11 through 6 / 30 / 11

(4) Page 1 of 2

(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
4 / 13 / 11	AT + T Wireless Atlanta, GA.	Campaign Phone	CHK		132.51
1					
4 / 22 / 11	Intuit Website 2632 Marine Way Mountainview, CA 94043	website	CHK		4.99
2					
4 / 29 / 11	Regions Bank 10001 W. Oakland Park Blvd Sunrise, FL 33351	Monthly Fee	Debit Account		10.00
3					
5 / 16 / 11	AT + T Wireless Atlanta, GA.	Campaign Phone	CHK		134.71
4					
5 / 23 / 11	Intuit 2632 Marine Way Mountainview, CA 94043	Campaign website	CHK		4.99
5					
5 / 31 / 11	Stamps. Com 12959 Coral Tree Place Los Angeles, CA 90066-7020	Campaign Stamps	CHK		9.99
6					
5 / 31 / 11	Regions Bank 10001 W. Oakland Park Blvd Sunrise, FL 33351	Monthly Fee	Debit		10.00
7					
6 / 6 / 11	Internet Guru Ft. Lauderdale, FL 33322	Social Media Design	CHK		350.00
8					

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 4, 1, 11 through 6, 30, 11

(4) Page 2 of 2

(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
6/10/11 9	Facebook 1601 S. California Ave. Palo Alto, CA 94304	Ad	CHK		2.59
6/16/11 10	AT & T Wireless Atlanta, GA	Campaign phone	CHK		134.34
6/17/11 11	Facebook 1601 S. California Ave. Palo Alto, CA 94304	Ad	CHK		16.25
6/22/11 12	Intuit 2632 Marinine way Mountainview, CA 94043	Campaign website	CHK		4.99
6/23/11 13	Facebook 1601 S. California Ave. Palo Alto, CA 94304	Ad	CHK		17.11
6/27/11 14	Stamps.com 12959 Coral Tree Place Los Angeles, CA 90066-7000	Stamps	CHK		15.99
6/29/11 15	Facebook 1601 S. California Ave. Palo Alto, CA 94304	Ad	CHK		8.59
6/30/11 16	Regions 10001 W. Oakland Park Blvd Sunrise, FL 33351	Monthly Fee	Debit		10.00

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

11 APR -6 AM 11:38
CITY CLERK
CITY OF SUNRISE

(1) John Fusaro
Name

(2) 11360 N.W. 41st St.
Address (number and street)

Sunrise, Fl. 33323
City, State, Zip Code

OFFICE USE ONLY

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): Sunrise Commission Group A

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous 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: From 01/01/11 To 03/31/11 Report Type Q1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1000

Loans \$ 200

Total Monetary \$ 1200

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1048.89

Transfers to Office Account \$ _____

Total Monetary \$ 1048.89

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 2103.09

(10) TOTAL Monetary Expenditures To Date

\$ 1572.38

(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) John Fusaro

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X _____
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) John Fusaro

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X _____
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro

(2) I.D. Number _____

(3) Cover Period 1 / 1 / 11 through 3 / 31 / 11

(4) Page 1 of 2

(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					
01/14/11	AT & T	Campaign Phone	MON		131.83
1					
01/20/11	Vista Printing	Campaign Material	MON		171.40
2					
01/24/11	Homestead Tech	Website	MON		4.99
3					
02/08/11	Vista Printing	Campaign Material	MON		60.08
4					
02/16/11	Sunrisers Club Phase 4	Advertising Campaign	MON		100.00
5					
2/16/11	Vista Printing	Campaign Material	MON		54.09
6					
2/17/11	AT & T Campaign Phone	Campaign Phone	MON		267.00
7					
02/23/11	Homestead Tech	website	MON		4.99
8					

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name John Fusaro (2) I.D. Number _____
 (3) Cover Period 01/1/11 through 03/31/11 (4) Page 2 of 2

(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					
03/09/11	A to Z printing	Campaign Material	MON		59.95
9					
03/02/11	Vista Printing	Campaign Material	MON		179.57 140.73
10					
03/02/11	Intuit Website	Website	MON		4.99
11					
03/31/11	Regions Bank	Monthly Fee	MON		10.00
12					
11					
11					
11					
11					

11 APR -6 AM 11:38
 CITY CLERK
 CITY OF SUNRISE

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name John Fusaro (2) I.D. Number _____

(3) Cover Period 01/01/11 through 03/31/11 (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							
01/31/11 1	John Fusaro 11360 N.W. 41 st St. Sunrise, Fl. 33323	I	Manager Candidate	Loan			200.00
02/03/11 2	Advocate Home Care Services 78166 W. Commercial Blvd. Lauderhill, Fl. 33351	B		CHE			500.00
03/25/11 3	Business Center Management Group 3650 Coral Ridge Dr. #103 Coral Springs, Fl. 33065	B		CHE			500.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

11 APR -6 AM 11:38
 CITY CLERK
 CITY OF SUNRISE

**STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

10 OCT 19 AM 11:19
CITY CLERK
CITY OF SUNRISE

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

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

John Tomas Fusaro

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

11360 NW 41st St.
Sunrise, Fl. 33323

4. Telephone (optional)

(954) 6614730

5. E-mail address (optional)

fts4sure@bellsouth.net

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

Commissioner Group A

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

John Tomas Fusaro

11. Mailing Address (If post office box or drawer, also include street address)

11360 NW 41st St

12. Telephone

(954) 6614730

13. City

Sunrise

14. County

Broward

15. State

Fl

16. Zip Code

33323

17. E-mail address (optional)

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

19. Name of Bank

REGIONS

20. Street Address

10001 W Oakland Park Blvd.

21. City

Sunrise

22. County

Broward

23. State

Florida

24. Zip Code

33351

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

10/18/2010

26. Signature of Candidate

X 

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

I, John Fusaro, do hereby accept the appointment
(Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer

10/18/2010

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

STATE OF FLORIDA
 APPOINTMENT OF CAMPAIGN TREASURER
 AND DESIGNATION OF CAMPAIGN
 DEPOSITORY FOR CANDIDATES
 (Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

CITY CLERK
 CITY OF SUNRISE
 10 SEP 29 PM 12:06

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

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

John Tomas Fusaro

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

11360 N.W. 41st Street
 Sunrise, Fl. 33323

4. Telephone (optional)

(954) 6614730

5. E-mail address (optional)

fts4sure@bellsouth.net

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

Commissioner Group A

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

John Tomas Fusaro

11. Mailing Address (If post office box or drawer, also include street address)

11360 NW 41st Street

12. Telephone

(954) 6614730

13. City

Sunrise

14. County

Broward

15. State

Fl

16. Zip Code

33323

17. E-mail address (optional)

fts4sure@bellsouth.net

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

19. Name of Bank

Bank Of America

20. Street Address

9990 W. Oakland Park Blvd.

21. City

Sunrise

22. County

Broward

23. State

Fl

24. Zip Code

33351

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

09/29/2010

26. Signature of Candidate

X

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

I, John Tomas Fusaro, do hereby accept the appointment
 (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

09/29/2010

Date

X

Signature of Campaign Treasurer or Deputy Treasurer

STATE OF FLORIDA
 APPOINTMENT OF CAMPAIGN TREASURER
 AND DESIGNATION OF CAMPAIGN
 DEPOSITORY FOR CANDIDATES

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

(PLEASE PRINT OR TYPE)

OFFICE USE ONLY

CITY CLERK
 CITY OF SUNRISE
 10 SEP 21 AM 11:17

1. CHECK APPROPRIATE BOX:

Original Appointment Change in: Treasurer/Deputy Depository Office Party

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

John Tomas Fusaro

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

11360 N.W. 41st St.
 Sunrise, Fl. 33323

4. Telephone (optional)

()

5. E-mail address (optional)

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

Commissioner Group A

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

John Fusaro

11. Mailing Address (If post office box or drawer, also include street address)

11360 N.W. 41st St.

12. Telephone

(954) 661-4730

13. City

Sunrise

14. County

Broward

15. State

Fl

16. Zip Code

33323

17. E-mail address (optional)

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

19. Name of Bank

Regions Bank

20. Street Address

10001 W. Oakland Park Suite 100

21. City

Sunrise

22. County

Broward

23. State

Fl.

24. Zip Code

33351

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

9.20.10

26. Signature of Candidate

X 

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

I, John Fusaro, do hereby accept the appointment
 (Please Print or Type Name)

designated above as: Campaign Treasurer Deputy Treasurer.

9.20.10

Date

X 

Signature of Campaign Treasurer or Deputy Treasurer

**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY


CITY CLERK
CITY OF SUNRISE

10 SEP 21 AM 11:18

I, John Fusaro,

candidate for the office of Commissioner Group A;

have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X 
Signature of Candidate

9.20.10
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

12 JUN -4 PM 12:33



NOTICE OF CANDIDACY AND AFFIDAVIT

I, John Tomas Fusaro, do hereby affirm that I am a candidate for the office of Sunrise Commission Group A, City of Sunrise, Broward County, Florida, in the Municipal Election to be held on November 6, 2012, 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 City Commissioner, or Mayor

[Signature]
Signature
6-2-12
Date

STATE OF FLORIDA
COUNTY OF BROWARD
CITY OF SUNRISE

The foregoing instrument was sworn to (or affirmed) and subscribed before me this 2 day of JUNE, 2012, by JOHN FUSARO.

[Signature]
Notary Public



Personally Known OR Produced Identification
Type of Identification Produced _____

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)

12 JUN -4 PM 12: 33

**CANDIDATE OATH –
NONPARTISAN OFFICE**

(Not for use by Judicial or
School Board Candidates)

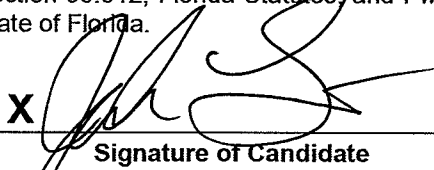
OFFICE USE ONLY

OATH OF CANDIDATE
(Section 99.021, Florida Statutes)

I, John Tomas Fusaro
(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT * – NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the nonpartisan office of Sunrise Commissioner (office) _____ (district #)
_____ (circuit #) A (group or seat #); I am a qualified elector of Broward County, Florida;

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.

X  (954) 647-4376 FusaroJohn@Gmail.com
Signature of Candidate Telephone Number Email Address

11360 N.W. 41st St. Sunrise Fl. 33323
Address City State ZIP Code

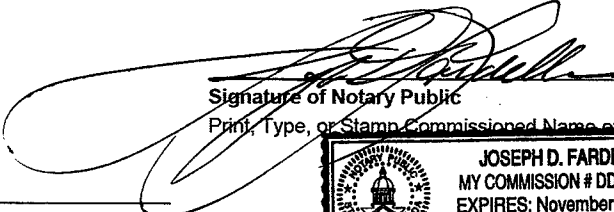
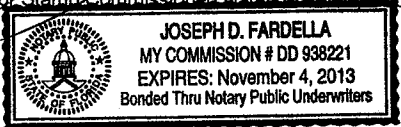
Candidate's Florida Voter Registration Number (located on your voter information card): 102166879

* Please print name phonetically on the line below as you wish it to be pronounced on the audio ballot for persons with disabilities (see instructions on page 2 of this form):
dzán tomas Fusáro

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this 2 day of JUNE, 2012.

Personally Known: or
Produced Identification: _____
Type of Identification Produced: _____


Signature of Notary Public
Print, Type, or Stamp Commissioned Name of Notary Public


FINANCIAL INTERESTS

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

LAST NAME - FIRST NAME - MIDDLE NAME:

Fusaro John Tomas

MAILING ADDRESS:

11360 N.W. 41st St.

CITY:

Sunrise

ZIP:

33323

COUNTY:

Broward

NAME OF AGENCY:

City of Sunrise

NAME OF OFFICE OR POSITION HELD OR SOUGHT:

Commission Group A

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

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

12 JUN -4 PM 12:33

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, 2011 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS 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). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (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 p. 4]

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

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
AI'S Transmission	10044 N.W. 46th St., Sunrise, FL 33351	Auto Repair

PART B - SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
None			

PART C - REAL PROPERTY [Land, buildings owned by the reporting person - See instructions p. 4] (If you have nothing to report, you must write "none" or "n/a")

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.

OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
None	

PART E — LIABILITIES [Major debts - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

① Southeast Toyota NAME OF CREDITOR	P.O. BOX 70832, Charlotte, N.C. 28272 ADDRESS OF CREDITOR
② Regions Bank	10001 W. Oakland Park Blvd, Sunrise, FL 33351
③ Small Business Association	409 3 rd St. S.W., Washington, D.C. 20416
④ Chase Bank	P.O. BOX 78420, Phoenix, AZ 85062

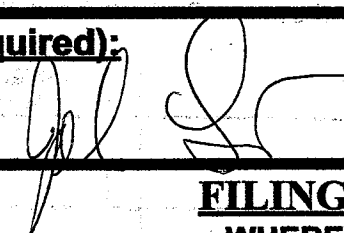
PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions p. 5]
 (If you have nothing to report, you must write "none" or "n/a")

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	None		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

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

SIGNATURE (required):

DATE SIGNED (required):

 6-4-12

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form, **including signing and dating it**, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

NOTE:

MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:

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.

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.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

Facsimiles will not be accepted.

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 for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment. However, filing a CE Form 1F (Final Statement of Financial Interests) does **not** relieve the filer of filing a CE Form 1 if he or she was in their position on December 31, 2011.

CITY CLERK
CITY OF SUNRISE

12 JUN -4 PM 12:33

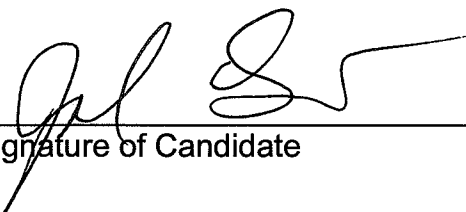


LOGIC AND ACCURACY TEST ACKNOWLEDGEMENT OF RECEIPT

I hereby acknowledge receipt of the Notice of Logic and Accuracy Test, pursuant to F.S. 101.5612. I was given written notice that the pre-election Logic and Accuracy test for the automatic tabulating equipment for the Municipal Election to be held on November 6, 2012 will take place at the date and location listed below.

October 17, 2012 at 10:00 a.m.

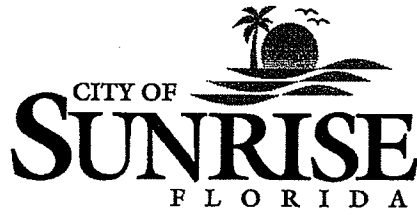
VOTING EQUIPMENT CENTER
1501 NW 40 AVENUE
LAUDERHILL, FL
(954) 712-1903



Signature of Candidate

6-4-12

Date

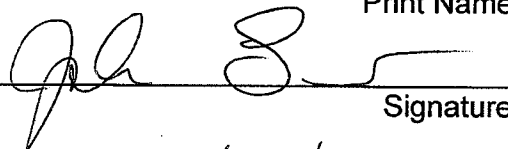


CITY CLERK
CITY OF SUNRISE
12 JUN -4 PM 12:33

RECEIPT OF CODE OF ETHICS ACKNOWLEDGEMENT

I have received, read, and understood the City of Sunrise Code of Ordinances, Chapter 10, Article II, Code of Ethics.

John Tomas Fusaro
Print Name


Signature

6-4-12
Date