

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) JULIAN CAZANAS JR
Name

(2) 881 W 53 ST.
Address (number and street)

Hiawah, FL 33012
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

APR 1 '19 12:06PM

(4) Check appropriate box(es):

- Candidate Office Sought: City Council - Seat 3
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 3 / 1 / 19 To 3 / 31 / 19 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 0.00

Loans \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

In-Kind \$ _____, _____, 0.00

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 0.00

Transfers to Office Account \$ _____, _____, 0.00

Total Monetary \$ _____, _____, 0.00

(8) Other Distributions

\$ _____, _____, 0.00

(9) TOTAL Monetary Contributions To Date

\$ _____, _____, 0.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 0.00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

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

(Type name) JULIAN CAZANAS JR
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

[Signature]
Signature

(Type name) JULIAN CAZANAS JR
 Candidate Chairperson (only for PC and PTY)

[Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

APR 17 12:06 PM

(1) Name Julian CAZANAS JR (2) I.D. Number _____

(3) Cover Period 3 / 1 / 19 through 3 / 31 / 19 (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						
/ /							
/ /							
/ /							
/ /							
/ /							

N/A

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Josiah Cazzetta Jr (2) I.D. Number _____
 (3) Cover Period 3/1/19 through 3/31/19 (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
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