

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) LOURDES LOZANO  
Name

(2) 7405 W 16 AVE.  
Address (number and street)

HIACLEAH FL 33018  
City, State, Zip Code

**OFFICE USE ONLY**

MAY 8 '19 4:10 PM

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: CITY COUNCIL GROUP 1
- 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 4/01/19 To 4/30/19 Report Type: M4

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_, \_\_\_\_\_, 500.00

Loans \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 500.00

In-Kind \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Transfers to Office Account \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, 0.00

### (8) Other Distributions

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, \_\_\_\_\_, 700.00

### (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) RICHARD IZARRA

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

X RICHARD IZARRA  
Signature

(Type name) LOURDES LOZANO

Candidate  Chairperson (only for PC and PTY)

X LOURDES LOZANO  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Lourdes Lozano (2) I.D. Number \_\_\_\_\_

(3) Cover Period 4/01/19 through 4/30/19 (4) Page \_\_\_\_\_ of \_\_\_\_\_

(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
<u>4/30/19</u>	<u>SALCADO LLP</u> <u>305 ALKAZAR AVE</u> <u>STE 3</u> <u>CORAL GABLES</u> <u>FL. 33134</u>	<u>B</u>	<u>Ret</u> <u>State</u>	<u>CHE</u>			<u>\$ 500.00</u>
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