

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) FERNANDO GODO
 Name
 (2) 4271 W 18 Ct
 Address (number and street)
Hialeah, FL 33012
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es): Hialeah City Council (Group 2)

Candidate Office Sought: _____

Political Committee (PC)

Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded

Party Executive Committee (PTY) Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 07 / 01 / 19 To 07 / 31 / 19 Report Type: M7

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 200 . 00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 600 . 00

In-Kind \$ _____ , _____ , 940 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 550 . 00

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

Total Monetary \$ _____ , _____ , 550 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 650 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 550 . 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:

ANDY ALFONSO
 (Type name)

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

FERNANDO GODO
 (Type name)

Candidate Chairperson (only for PC and PTY)

X _____
 Signature

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name FERNANDO GODO (2) I.D. Number _____

(3) Cover Period 07 / 01 / 19 through 07 / 31 / 19 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
07 / 10 / 19	Allied Signs Corp. 349 East 49 Street Hialeah, FL 33013	B	Printing	INK	Flyers and Stickers	N/A	940.00 USD
1							
07 / 19 / 19	Godo, Fernando 4271 W 18 Ct Hialeah, FL 33012	S	Self	CAS	N/A	N/A	600.00 USD
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name FERNANDO GODO

(2) I.D. Number _____

(3) Cover Period 07 / 01 / 19 through 07 / 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
(6) Sequence Number					
07 / 19 / 19	City of Hialeah 501 Palm Avenue Hialeah, FL 33010	Election Assessment Fee	MON	N/A	\$ 440.00
1					
07 / 19 / 19	City of Hialeah 501 Palm Avenue Hialeah, FL 33010	Qualifying Fee	MON	N/A	\$ 100.00
2					
07 / 31 / 19	FirstBank Florida 1325 W 49th St, Hialeah, FL 33012	Bank Fee	MON	N/A	\$ 10.00
3					
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// /					
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