CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jose Moises Martinez
Name

(2) 1650 w 44th pl APT 117
Address (number and street)

Hialeah, FL, 33012
City, State, Zip Code

☐ Check here if address has changed

OFFICE USE ONLY

MAY19'20 10:12AM

(3) ID Number: _____

(4) Check appropriate box(es):

☑ Candidate Office Sought: City Council Group 5
☐ Political Committee (PC)
☐ Electioneering Communications Org. (ECO)
☐ Party Executive Committee (PTY)
☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded
☐ Check here if PTY has disbanded
☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 04 / 01 / 2020 To 04 / 30 / 2020 Report Type: M4-2020

☑ Original ☐ Amendment ☐ Special Election Report

(6) Contributions This Report

Cash & Checks	$ ___ , ___ , 100 . 00
Loans	$ ___ , ___ , ___ . ___
Total Monetary	$ ___ , ___ , ___ . ___
In-Kind	$ ___ , ___ , ___ . ___

(7) Expenditures This Report

Monetary Expenditures	$ ___ , ___ , 10 . 00
Transfers to Office Account	$ ___ , ___ , ___ . ___
Total Monetary	$ ___ , ___ , 10 . 00

(8) Other Distributions

$ ___ , ___ , ___ . ___

(9) TOTAL Monetary Contributions To Date

$ ___ , ___ , 315 . 00

(10) TOTAL Monetary Expenditures To Date

$ ___ , ___ , 10 . 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) Daysi Martinez
☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X Daysi Martinez
Signature

(Type name) Jose Martinez
☑ Candidate ☐ Chairperson (only for PC and PTY)

X J Martinez
Signature

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Jose Moises Martinez **(2) I.D. Number** _____

(3) Cover Period 04 / 01 / 2020 through 04 / 30 / 2020 **(4) Page** 1 of 1

(5) Date / (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Contributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
04 / 15 / 2020 1	Jose Martinez 1650 w 44th pl Apt 117 Hialeah, FL, 33012	I	Bread Distribution	Check			$100.00
/ /							
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/ /							
/ /							
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/ /							

DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jose Moises Martinez (2) I.D. Number

(3) Cover Period 04/01/2020 through 04/30/2020 (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
04/30/2020 1	Wells Fargo Bank 4299 NW 36th st Miami springs, FL, 33166	Monthly Service Fee	Petty cash spent		$10.00
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DS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES