

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CHRISTOPHER MONZON
Name

(2) 640 E 27 ST
Address (number and street)

MIALRAH FL 33013
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

JAN 4 21 11:51 AM

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: CITY COUNCIL GROUP 7
- 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 11 / 01 / 2020 To 11 / 30 / 2020 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , 0 . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 13 . 00

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

Total Monetary \$ _____ , _____ , 13 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 27 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 13 . 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) CHRISTOPHER MONZON

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

X Christopher Monzon

Signature

(Type name) CHRISTOPHER MONZON

Candidate Chairperson (only for PC and PTY)

X Christopher Monzon

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CHRISTOPHER MONZON (2) I.D. Number _____
 (3) Cover Period 11/01/2020 through 11/30/2020 (4) Page 2 of 2

| (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 |
|--|--|--|----------------------------|-------------------|----------------|
| 11/30/2020 1 | CHRISTOPHER MONZON 640 E 275TH AVE FL 33013 | BANK FEE | CAN | | 13.00 |
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