

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) VIVIAN CASALS-MUNOZ
 Name
 (2) 8015 WEST 14TH AVENUE
 Address (number and street)
HIALEAH, FL 33014
 City, State, Zip Code

OFFICE USE ONLY

MAY1021 4:26PM

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: _____
- 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 / 2021 To 04 / 30 / 2021 Report Type: 2021-M3

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . 00

Total Monetary \$ _____ , _____ , _____ . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 4 , 000 . 00

Transfers to Office Account \$ _____ , _____ , _____ . 00

Total Monetary \$ _____ , 4 , 000 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , _____ . 00

(10) TOTAL Monetary Expenditures To Date

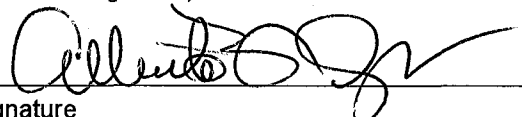
\$ _____ , 4 , 000 . 00

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

X 
 Signature

(Type name) VIVIAN CASALS-MUNOZ
 Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name VIVIAN CASALS-MUNOZ (2) I.D. Number _____

(3) Cover Period 04 / 01 / 2021 through 04 / 30 / 2021 (4) Page 2 of 3

(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
00 / 00 / 00	-----	---	---	00.00	---	---	00.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name VIVIAN CASALS-MUNOZ

(2) I.D. Number _____

(3) Cover Period 04 / 01 / 2021 through 04 / 30 / 2021

(4) Page 3 of 3

(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					
04 / 12 / 2021	MARIA J. FERNANDEZ 260 WEST 14TH STREET HIALEAH, FLORIDA 33010	CAMPAIGN WORKER	CAN	N/A	4,000.00
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