CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **Mayra Jimenez**
Name

(2) **6241 E 4th Ave**
Address (number and street)

Hialeah, FL 33013
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

☑ Candidate   Office Sought: **City Council Member**
☐ 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   ☐ Check here if no other IE or EC reports will be filed
individual making electioneering communications)

(5) Report Identifiers

Cover Period: From **09** / **01** / **21** To **10** / **01** / **21**   Report Type: **61**

☑ Original   ☐ Amendment   ☐ Special Election Report

(6) Contributions This Report		(7) Expenditures This Report	
Cash & Checks	$ 0.00	Monetary Expenditures	$ 995.10
Loans	$	Transfers to Office Account	$
Total Monetary	$ 0.00	Total Monetary	$ 995.10
In-Kind	$		

(8) Other Distributions
$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date
$ _____ , **1 , 945 . 10**

(10) TOTAL Monetary Expenditures To Date
$ _____ , **1 , 785 . 10**

(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) **Evelyn Jimenez**

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

X _____
Signature

(Type name) **MAYRA Jimenez**

☑ Candidate   ☐ Chairperson (only for PC and PTY)

X _____
Signature

DS-DE 12 (Rev. 11/13)   SEE REVERSE FOR INSTRUCTIONS

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name __Mayra Jimenez__　　　　　　(2) I.D. Number _____

(3) Cover Period __09 / 01 / 21__ through __10 / 01 / 21__　　(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
09/04/21 1	Allied Signs 349 E 49th St Hialeah, FL 33013	Yard Signs	CAN		$995.10
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DS-DE 14 (Rev. 11/13)　　　　SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES