

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Horgan  
Name

(2) 6361 E. G Ave  
Address (number and street)  
Hialeah, FL 33013  
City, State, Zip Code

**OFFICE USE ONLY**

JAN13'22 4:36PM

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: Hialeah City Council Group VII
- 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 10 / 29 / 21 To 01 / 31 / 22 Report Type: TR

- Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

In-Kind \$ \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, 778. 65

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

### (8) Other Distributions

\$ \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 3,800. 00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 3,800. 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) Michael Horgan

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

**X** M. Horgan  
Signature

(Type name) Michael Horgan

Candidate  Chairperson (only for PC and PTY)

**X** M. Horgan  
Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Michael Horgan (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 10/29/21 through 01/31/22 (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					
12/30/21	Horgan, Michael 6361 E 6 Ave Hialeah, FL 33013	Reimbursement	CAN		778. <sup>65</sup>
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