REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS, 501(c)(4) ORGANIZATIONS AND POLITICAL PARTIES

Name ROBERTO J. GONZALEZ	OFFICE USE ONLY
Address (number and street) 2600 S DOUGLAS ROAD, SUITE 900	
City, State, Zip Code CORAL GABLES, FL 33134	
☐ CHECK IF ADDRESS HAS CHANGED	19 19 19 19 19 19 19 19 19 19 19 19 19 1
Filing as:	
☐ Elected Official Office:	
Miami-Dade County Candidate Office: MIAMI DADE COUNTY COMMISSIONER D	DISTRICT #11
☐ Municipal Candidate Office:	Name of Municipality)
	ICATION son 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.	I certify that I have examined this report and it is true, correct, and complete.
JEANNINE MIRANDA (Type name) ☐ Treasurer ☐ Deputy Treasurer	ROBERTO J GONZALEZ (Type name)
Signature Date	Signature

REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS, 501(C)(4) ORGANIZATIONS AND POLITICAL PARTIES

This report must be filed by Mlami-Dade County and Municipal Elected Officers and Candidates to publicly disclose their fundralsing activities for Political Committees, Electioneering Communications Organizations, 501(C)(4) Organizations and Political Parties within five days of commencing solicitation activities, either directly or indirectly, on behalf of said organization(s).

ROBERTO J GONZALEZ

(1) Name	TOBERTO O CONE LEE		I.D. Number	
(2) Page	1 of 1		(Only for C	County Candidates)
(3) Row Number	(4) Name of PC, ECO, 501(c)(4) Organization or Political Party	(5) PC, ECO, 501(c)(4) Organization or Political Party	(6) Description of Relationship between Candidate/Officer and PC, ECO, 501(c)(4) Organization or Political Party	(7) Date solicitation activities started
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	OFFICE USE ONLY
Name	
ROBERTO J. GONZALEZ	
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Address (number and street) 2600 S DOUGLAS ROAD, SUITE 900	30.0
2000 S DOUGLAS ROAD, SUITE 900	
City, State, Zip Code	₹0 €
CORAL GABLES, FL 33134	
☐ CHECK IF ADDRESS HAS CHANGED	. 29
Filing as:	
☐ Elected Official	
Office:	
■ Miami-Dade County Candidate Office: MIAMI DADE COUNTY COMMISSIONER D Municipal Candidate Office:	Name of Municipality)
CERTIE	ICATION
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JEANNINE MIRANDA	ROBERTO J GONZALEZ
(Type name)	(Type name)
Signature	Signature 01 -03 -2024
Date	Date

REPORTING OF SOLICITATION OF CONTRIBUTIONS FOR POLITICAL COMMITTEES, ELECTIONEERING COMMUNICATIONS ORGANIZATIONS, 501(C)(4) ORGANIZATIONS AND POLITICAL PARTIES

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ROBERTO J GONZALEZ

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