

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY
 ONLINE SUBMISSION

(1) Dennis C. Moss
 Name

(2) 17125 SW 109th Court
 Address (number and street)

Miami, FL 33157
 City, State, Zip Code

Check here if address has changed

(3) ID Number: 280

(4) Check appropriate box(es):

- Candidate Office Sought: County Commission District 09
- 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 4 / 1 / 2004 To 6 / 30 / 2004 Report Type: Q2-04

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 450 . 00

Loans \$, , 0 . 00

Total Monetary \$, 1 , 450 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 112 , 975 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 16 , 567 . 91

(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)

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

X

Signature

(Type name)

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Dennis C. Moss (2) I.D. Number 280

4/1/2004 through 6/30/2004

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Dennis C. Moss

(2) I.D. Number 280

(3) Cover Period 4/1/2004 through 6/30/2004

(4) Page 1 of 0

(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					
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