FLORIDA DEPARTMENT OF STATE   DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jose L. Fernandez

Name

(2) 815 Ponce de Leon, Coral Gables, FL 33134

Address (number and street)

City, State, Zip Code

☐ **CHECK IF ADDRESS HAS CHANGED**

OFFICE USE ONLY   474

(3)   ID Number: _____

(4)   Check appropriate box(es):

[X] Candidate (office sought):   County Court Judge Group 43

☐ Political Committee

☐ **CHECK IF PC HAS DISBANDED**

☐ Committee of Continuous Existence

☐ **CHECK IF CCE HAS DISBANDED**

☐ Party Executive Committee

☐ Electioneering Communication

☐ **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**

(5) REPORT IDENTIFIERS

Cover Period: From 7/1/2006 / To 7/28/2006 /   Report Type F1-06

☐ Original   [X] Amendment   ☐ Special Election Report   ☐ Independent Expenditure Report

(6)   CONTRIBUTIONS THIS REPORT

Cash & Checks	$ 0.00
Loans	$ 0.00
Total Monetary	$ 0.00
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

$ 96,524.98

(10)   TOTAL Monetary Expenditures To Date

$ 78,861.22

(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 electioneering commun.)   ☐ Treasurer   ☐ Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☐ Candidate   ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

DS-DE 12 (Rev. 08/04)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _Jose L. Fernandez_ **(2) I.D. Number** _474_

(3) Cover Period _7/1/2006_ ___/___/___ through _7/28/2006_ ___/___/___ **(4) Page** _1_ of _2_

(5) Date / (6) Sequence Number	(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
7/5/2006 ___/___/___ 1	Fernandez, Lilia 1501 S. Greenway Drive Coral Gables, FL 33134	I	works at home <	CH		Delete	$500.00
7/5/2006 ___/___/___ 2	Fernandez, Lilia 1501 S. Greenway Drive Coral Gables, FL 33134	I	housewife	CH		Add	$500.00
7/11/2006 ___/___/___ 3	Mestas, Maria E. 9631 SW 115 Avenue Miami, FL 33176	I	administration	CH		Delete	$200.00
7/11/2006 ___/___/___ 4	Mestas, Maria E. 9631 SW 115 Avenue Miami, FL 33176	I	administrator - dr's office	CH		Add	$200.00
7/17/2006 ___/___/___ 5	Silva, Patricia 8940 SW 60th Avenue Miami, FL 33156	I	works at home <	CH		Delete	$200.00
7/17/2006 ___/___/___ 6	Silva, Patricia 8940 SW 60th Avenue Miami, FL 33156	I	housewife	CH		Add	$200.00
7/27/2006 ___/___/___ 7	Farach, Monique 8360 SW 60th Avenue South Miami, FL 33143	I	works at home <	CH		Delete	$150.00
7/27/2006 ___/___/___ 8	Farach, Monique 8360 SW 60th Avenue South Miami, FL 33143	I	housewife	CH		Add	$150.00

DS-DE 13 (Rev. 08/03) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _Jose L. Fernandez_

(2) I.D. Number _____

(3) Cover Period _7/1/2006_ ___/___/___ through _7/28/2006_ ___/___/___ **(4) Page** _2_ of _2_

(5) Date / (6) Sequence Number	(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
7/27/2006 / / 9	Garcia, Marta 212 NW 48th Court Miami, FL 33126	I	works at home <	CH		Delete	$250.00
7/27/2006 / / 10	Garcia, Marta 212 NW 48th Court Miami, FL 33126	I	housewife	CH		Add	$250.00
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DS-DE 13 (Rev. 08/03)   SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jose L. Fernandez   **(2) I.D. Number** 474

(3) Cover Period 7/1/2006 ___/___/___ **through** 7/28/2006 ___/___/___   **(4) Page** 1 **of** 0

(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
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