

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

OFFICE USE ONLY

(1) LEONARDO S. ANTHONY
Candidate, Committee or Party Name
(2) 14820 NARAJITA LAKES BLVD. APT PH
Address (number and street)
HOMESTEAD, FLORIDA 33032
City, State, Zip Code

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MIAMI COUNTY
ELECTIONS DEPARTMENT

Check box if address has changed (3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): LOUNCIAMAN SUBAREA (156) COMMUNITY COUNCIL (15)
 Political Committee Check if PC has DISBANDED
 Committee of Continuous Existence Check if CCE has DISBANDED
 Party Executive Committee

(5) REPORT IDENTIFIERS

Cover Period: From 07 / 01 / 04 To 07 / 23 / 04 Report Type F1-04
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$, 1,500 . 00
 Loans \$, .
 Total Monetary \$, .
 In-Kind \$, .

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$, , 100 . 00
 Transfers to Office Account \$, .
 Total Monetary \$, .

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 1,500 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 100 . 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.
LEONARDO S. ANTHONY
 Name of Treasurer Deputy Treasurer
X Leonard S Anthony
 Signature

I certify that I have examined this report and it is true, correct and complete.
LEONARDO S. ANTHONY
 Name of Candidate Chairman
 (PC/PTY Only)
X Leonard S Anthony
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name LEONARD S. ANTHONY (2) I.D. Number _____

(3) Cover Period 07 / 01 / 04 through 07 / 23 / 04 (4) Page 2 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
07 / 12 / 04	ANTHONY, LEONARD STANLEY						
3	APT PH 11820 N ORANGE LAKES BL HOMESTEAD, FL 33032	I	RETIRED	CAS			\$1,500.00
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 ELECTIONS DEPARTMENT

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name LEONARD S. ANTHONY (2) I.D. Number _____
 (3) Cover Period 07 / 01 / 04 through 07 / 23 / 04 (4) Page 3 of 3

(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					
07/12/04	BOARD OF COUNTY COMMISSIONERS 111 NW 1st STREET MIAMI, FL 33128	CANDIDATE QUALIFYING FEE	DIS		\$100.00
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