

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

OFFICE USE ONLY

(1) Lasoff, Dr. Edward M.  
Candidate, Committee or Party Name

(2) 11112 SW 128 Place  
Address (number and street)

Miami, FL 33186  
City, State, Zip Code

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

(4) Check appropriate box(es):

Candidate (office sought): Miami-Dade County School Board District 7

Political Committee  Check if PC has DISBANDED

Committee of Continuous Existence  Check if CCE has DISBANDED

Party Executive Committee

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(5) REPORT IDENTIFIERS

Cover Period: From 07 / 01 / 04 To 07 / 23 / 04 Report Type Candidate RPT

Original  Amendment  Special Election Report  Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

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

Loans \* 2,000.00

Total Monetary \* 2,000.00

In-Kind \* 0

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1,467.76

Transfers to Office Account \$ 0

Total Monetary \$ 1,467.76

(8) Other Distributions  
\$ 0

(9) TOTAL Monetary Contributions To Date  
\$ 2,336.00

(10) TOTAL Monetary Expenditures To Date  
\* 1,695.48

(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.

Edward B. Rojas  
Name of  Treasurer  Deputy Treasurer

X [Signature]  
Signature

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

Dr. Edward M. Lasoff  
Name of  Candidate  Chairman  
(PC/PTY Only)

X Edward Lasoff  
Signature

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lasoff, Dr. Edward M. (2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 01 / 04 through 07 / 23 / 04 (4) Page 1 of 1

(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
07 / 09 / 04	Lasoff, Dr Edward M.	I		LOA			\$2,000.00
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**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Lasoff, Dr. Edward M.

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 07 / 01 / 04 through 07 / 23 / 04

(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					
07, 10, 04	Board of County Commissioners Miami, Fl.	Qualifying Fee	MON		\$1,467.76
1					
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