CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Salvatore Guagliardo Jr.	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	4015 West Knights Ave.	Submitted on:							
	Address (number and street)	11/11/2018 21:17:44 (eastern)							
	Tampa, FL 33611								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:1549							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought: TAMPA CITY COUNCIL, DISTRICT 4</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
	(5) Report	Identifiers							
Cove	er Period: From <u>10</u> / <u>1</u> / <u>2018</u> To	10 / 31 / 2018 Report Type: M10							
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , <u>480</u> . <u>00</u>	Monetary							
Loar		Transfers to Office Account \$ , , , 0 . 00							
Tota	I Monetary \$ , , <u>480</u> . <u>00</u>	Total Manatany C 110 50							
In-Ki	nd \$, ,, 0 . 00	Total Monetary \$ , , <u>119</u> . <u>50</u>							
		(8) Other Distributions \$ , , <u>0</u> 00_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T	(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								
X		X Signature							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Salvatore Guagliard	o Jr.			1	1549	
	10/1/2018		1	0/31/2018			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page		of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
10/2/2018	Pizzurro, Sandra 609 South Glen Avenue	Í	nurse practitior	СН	*		\$480.0
1	Tampa, FL 33609		er				
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DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	JES	

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Salvato:	re Gu	agliar	do Jr.			 (2) I.D. Nun	nber	1	L549	
	1	0/1/2	2018		10/31/	2018					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
10/3/2018	Web Elect, 1256 Vinetree Dr Temple Terrace, FL 33510	campaign information app	МО		\$85.00
10/15/2018	Anedot, 4017 Buena Vista St Dallas, Tx 75204	cc fees	MO		\$19.50
10/2/2018	Clover Go, 785 Castro St Mountain VIew, CA 94041	cc fees	МО		\$15.00
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DS-DE 14 (Rev.					