

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

(1) Diana Gonzalez
Name
(2) P.O. BOX 2654
Address (number and street)
Miami, FL 33116
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1035312]
Submitted on:
4/9/2012 22:17:36 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 1107

(4) Check appropriate box(es):
 Candidate (office sought): County Court Judge Group 10
 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 1/1/2012 To 3/31/2012 Report Type Q1-12
 Original 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
 \$ 10,380.00

(10) TOTAL Monetary Expenditures To Date
 \$ 21.33

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p>X _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)</p> <p>X _____</p> <p>Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Diana Gonzalez (2) I.D. Number 1107
 1/1/2012 through 3/31/2012
 (3) Cover Period / / through / / (4) Page 1 of 2

(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
(6) Sequence Number		Type	Occupation				
3/22/2012 / /	United Premium Finance, 1313 N.W. 167th Street Miami Gardens, FL 33169	B	business	CH		Delete	\$500.00
1							
3/22/2012 / /	United Premium Finance, 1313 N.W. 167th Street Miami Gardens, FL 33169	B	insur. premium finance	CH		Add	\$500.00
2							
3/22/2012 / /	United Group Underwriters, 1313 167th Street Miami Gardens, FL 33169	B	business	CH		Delete	\$500.00
3							
3/22/2012 / /	United Group Underwriters, 1313 167th Street Miami Gardens, FL 33169	B	insr. underwrite r	CH		Add	\$500.00
4							
3/22/2012 / /	United Auto Insurance Co, 1313 NW 167th Street Miami Gardens, FL 33169	B	business	CH		Delete	\$500.00
5							
3/22/2012 / /	United Auto Insurance Co, 1313 NW 167th Street Miami Gardens, FL 33169	B	insurance co	CH		Add	\$500.00
6							
3/8/2012 / /	Gray, Keith 9595 Harding Avenue Surfside, FL 33154	I	business owner	CH		Delete	\$500.00
7							
3/8/2012 / /	Gray, Keith 9595 Harding Avenue Surfside, FL 33154	I	jeweler	CH		Add	\$500.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Diana Gonzalez **(2) I.D. Number** 1107
(3) Cover Period 1/1/2012 through 3/31/2012 **(4) Page** 2 of 2

(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
3/23/2012 / /	Diaz-Fabian, Carmen PO BOX 893 FT. LAUD, FL 33302	I busn. owner	CH		Delete	\$200.00
9						
3/23/2012 / /	Diaz-Fabian, Carmen PO BOX 893 FT. LAUD, FL 33302	I own. el dir. hispano	CH		Add	\$200.00
10						
3/30/2012 / /	Parrillo, Richard 1313 NW 167th Street Miami Gardens, FL 33169	I business owner	CH		Delete	\$500.00
11						
3/30/2012 / /	Parrillo, Richard 1313 NW 167th Street Miami Gardens, FL 33169	I own. untd. auto ins.	CH		Add	\$500.00
12						
/ /						
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Diana Gonzalez

(2) I.D. Number 1107

(3) Cover Period 1/1/2012 through 3/31/2012

(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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