FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) Diana Gonzalez	OFFICE USE ONLY				
Name	ONLINE SUBMISSION				
(2) P.O.BOX 2654 Address (number and street)	[1043629]				
Miami, FL 33116	Submitted on: 8/22/2012 16:22:59 (eastern)				
City, State, Zip Code	0/22/2012 10·22·35 (Castelli)				
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:1107				
(4) Check appropriate box(es):  \[ \times \text{ Candidate (office sought): } \text{ County Court Judge Group 10} \]  \[ \text{ Political Committee}  \text{ CHECK IF PC HAS DISBANDED} \]  \[ \text{ Check IF CCE HAS DISBANDED} \]  \[ \text{ Party Executive Committee}  \text{ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED} \]					
(5) REPORT I					
Cover Period: From $\frac{1}{I}$ To	3/31/2012 / Report Type Q1-12				
☐ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report				
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
Cash & Checks \$	Monetary Expenditures \$ 0.33				
Loans \$	Transfers to Office Account \$ 0.00				
Total Monetary \$	Total Monetary \$ 0.33				
In-Kind \$					
	(8) Other Distributions \$0.00				
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$				
(11) CERTI					
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)  I certify that I have examined this report and it is true, correct, and complete.  (Type name)					
Individual (only for electioneering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)				
X	X				
Signature	Signature				

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Diana Gonzalez				2) I.D. Numb	er1	107
	1/1/2012			/31/2012			
(3) Cover Perio	od / /	thre	ough	<i>l l</i>	(4) Pag	ge	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)	_	COLUMN PORT I SECTION PROPERTY.		Income (Proceed)		
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	A
Number	City, State, Zip Code Paypal,	Type B	Occupation paypal	Type CH	Description	Add	Amount \$0.1
3/29/2012	P.O. Box 45950		verifybank				70.1
1 1	Omaha, ne 68145		_				
1							
-							
	Daynal	В	paypal	СН		Add	\$0.1
3/29/2012	Paypal, P.O. Box 45950		раурат	CII		Add	70.1
1 1	Omaha, Ne 68145						
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Diana	a Gonzalez		(2) I.D. Number	1107
	1/1/2012	3/31/2012		
(3) Cover Period	I = I	through / /	(4) Page1	<b>of</b> 1

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
3/29/2012	Paypal.com, P.O. Box 45950 Omaha, NE 68145	electronic/ach debit paypal verifybank 404rtj222bfqa2n	МО	Add	\$0.33
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DS-DE 14 (Rev.	08/03)				