

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Eddy Gonzalez  
 Name  
 (2) 6080 East 4th Avenue  
 Address (number and street)  
Hialeah, FL 33013  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1073372]  
 Submitted on:  
 8/20/2014 10:53:38 (eastern)

Check here if address has changed

(3) ID Number: 1299

(4) Check appropriate box(es):

- Candidate Office Sought: Property Appraiser
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 7 / 5 / 2014 To 7 / 18 / 2014 Report Type: 14P3

Original  Amendment  Special Election 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

\$        , 245 , 680 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 200 , 615 . 47

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Eddy Gonzalez (2) I.D. Number 1299  
 (3) Cover Period 7/5/2014 through 7/18/2014 (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
7/14/2014 / /	GARCIA, JOSHUA S. 18923 NW 45TH AVENUE MIAMI GARDENS, FL 33055	I	business owner	CH		Delete	\$300.00
1							
7/14/2014 / /	GARCIA, JOSHUA S. 18923 NW 45TH AVENUE MIAMI GARDENS, FL 33055	I	physician	CH		Add	\$300.00
2							
/ /							
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/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Eddy Gonzalez

(2) I.D. Number 1299

(3) Cover Period 7/5/2014 through 7/18/2014

(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					
7/15/2014 //	AYERS, ROXANNA 31 SE 5TH STREET, APT 2010 MIAMI, FL 33132	reimbursement	MO	Delete	\$29.05
1					
7/15/2014 //	AYERS, ROXANNA 31 SE 5TH STREET, APT 2010 MIAMI, FL 33132	reimbursement	RM	Add	\$29.05
2					
7/11/2014 //	CHAVEZ, ANDRES 9816 COSTA DEL SOL BLVD DORAL, FL 33178	reimbursement	MO	Delete	\$36.74
3					
7/11/2014 //	CHAVEZ, ANDRES 9816 COSTA DEL SOL BLVD DORAL, FL 33178	reimbursement	RM	Add	\$36.74
4					
7/17/2014 //	AYERS, ROXANNA 6401 SW 113TH PLACE MIAMI, FL 33132	reimbursement	MO	Delete	\$84.08
5					
7/17/2014 //	AYERS, ROXANNA 6401 SW 113TH PLACE MIAMI, FL 33132	reimbursement	RM	Add	\$84.08
6					
7/17/2014 //	CHAVEZ, ANDRES 9816 COSTA DEL SOL BLVD DORAL, FL 33178	reimbursement	MO	Delete	\$63.69
7					
7/17/2014 //	CHAVEZ, ANDRES 9816 COSTA DEL SOL BLVD DORAL, FL 33178	reimbursement	RM	Add	\$63.69
8					