

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Christopher Leon
 Name
 (2) 7420 SW 107th Ave; Apt. 7109
 Address (number and street)
Miami, FL 33173
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1186283]

Submitted on:
 3/31/2019 10:06:31 (eastern)

Check here if address has changed (3) ID Number: 2204

(4) Check appropriate box(es):

Candidate Office Sought: County Commission District 10

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 3 / 1 / 2019 To 3 / 31 / 2019 Report Type: 19M03

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 \$, , 7 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 7 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, , 650 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, , 578 . 78

(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 Christopher Leon (2) I.D. Number 2204

3/1/2019 through 3/31/2019

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Christopher Leon

(2) I.D. Number 2204

(3) Cover Period 3/1/2019 through 3/31/2019

(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					
3/29/2019 / /	Regions Bank, 9450 SW 40th Street Miami, FL 33165	bank fee	MO		\$7.00
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