

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

**OFFICE USE ONLY**

(1) CITIZENS AGAINST ANNEXATION TO  
Name SWEETWATER  
(2) 7220 NW 36 ST. SUITE 637  
Address (number and street)  
MIAMI FL 33166  
City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

☐ Candidate (office sought): \_\_\_\_\_

☒ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

☒ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING  
COMMUNICATION REPORTS WILL BE FILED

RECEIVED  
MAY - 1 AM 9:21  
MAY - 1 AM 9:21  
ELECTIONS DIVISION

**(5) REPORT IDENTIFIERS**

Cover Period: From 04/11/06 To 04/30/06 Report Type SA55-06

☒ Original    ☐ Amendment    ☐ Special Election Report    ☐ Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$       - 0 -      

Loans \$       - 0 -      

Total Monetary \$       - 0 -      

In-Kind \$       - 0 -      

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$       194.39      

Transfers to Office Account \$       - 0 -      

Total Monetary \$       194.39      

(8) Other Distributions \$       - 0 -      

**(9) TOTAL Monetary Contributions To Date**

\$       1,335.32      

**(10) TOTAL Monetary Expenditures To Date**

\$       1,335.32      

**(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) Migdalena Vazquez  
☐ Individual (only for electioneering commun.)    ☐ Treasurer    ☒ Deputy Treasurer

X Migdalena Vazquez  
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) TERESITA MONTANARO  
☐ Candidate    ☒ Chairperson (only for PC, PTY & electioneering commun. organization)

X Montanaro  
Signature

# CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name CITIZENS AGAINST ANNEXTATION TO SWEETWATER

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 04/11/06 through 04/30/06

(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
4/10/06	ST. JUDE CHILDRENS' HOSPITAL PO BOX 50 MEMPHIS, TN 38101-9929	CHARITABLE CONTRIBUTION TO CLOSEOUT DANK Acct.	MON.		194.39
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MIAMI-DADE COUNTY  
ELECTIONS DEPARTMENT