	CAMPAIGN TREASURE	R'S REPORT SUMMARY									
(1)	Hector Abad	OFFICE USE ONLY									
` ,	Name	ONLINE SUBMISSION									
(2)	8916 NW 149th Terrace	[1301468]									
	Address (number and street)	Submitted on: 1/3/2024 00:10:41 (eastern)									
	Miami Lakes, Fl 33018										
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number:54									
(4)	Check appropriate box(es):										
	 ☐ Candidate Office Sought: Council Seat 6 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 										
	(5) Report	Identifiers									
Cove	er Period: From 12 / 1 / 2023 To	12 / 31 / 2023 Report Type: M12									
⊠ o	riginal Amendment Spe	ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Casl	n & Checks \$, , <u>475</u> . <u>00</u>	Monetary									
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$, , 0 . 00									
Tota	I Monetary \$, , <u>475</u> . <u>00</u>	Total Monetary \$, , 14 . 35									
In-Ki	nd \$,,, <u>0</u> .00										
		(8) Other Distributions \$, , 000									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$, <u>4</u> , <u>505</u> . <u>00</u>	\$, <u>1</u> , <u>326</u> . <u>30</u>									
	(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	☐ Candidate ☐ Chairperson (only for PC and PTY)									
X		x									
Si	gnature	Signature									

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Hector A	Abad				(2)		54		
	12/	1/20	23		12/31	/2023				
(3) Cover Peri	od	1	1	through	1	1	(4) Page	1	of	1

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	С	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
12/16/2023	Casteleiro, Julio 3169 Whisper Wind Dr St Cloud, Fl 34771	Î	social worker	СН			\$100.00
1							
12/1/2023	Alonso, Kirenia 7191 West 24 Ave #26 Hialeah, Fl 33016	I	claims adjustor	СН			\$100.00
2							
12/1/2023	Hernandez-Carmenate Holden 5100 West 12 Lane Hiaelah, Fl 33012	e, I	engineer	СН			\$50.00
3	Hidelan, F1 33012						
12/2/2023	Carrillo, Rene 11607 NW 11 Street Pembroke Pines, Fl 33026	I	engineer	СН			\$100.00
4							
12/3/2023	Borges, Angelica 810 NW 93 Avenue Pembroke Pines, Fl 33024	I	teacher	СН			\$25.00
12/20/2023	Sanchez, Ginette	I	educator	СН			\$50.00
6	Hiahelah, Fl 33018						
12/23/2023	Abad, Katheryn 8916 NW 149 Terrace Miami Lakes, Fl 33018	I	not employed	СН			\$25.00
7							
12/23/2023	Exposito, Yoan 2122 SE 6 Ln Cape Coral, Fl 33990	I	not employed	СН			\$25.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Hector	Abad	110				(2) I.D. Num	iber	5	54	
		12/1/2	023		12/31/	2023					
(3) Cover Po	eriod	1	1	through	/	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
12/23/2023	Donate Bucket, 1779 N. University Dr. #102 Pembroke Pines, Fl 33024	fees	МО		\$14.35
1					
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