CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Armando R. Ramirez	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	PO Box 451052	Submitted on:							
	Address (number and street)	7/5/2019 17:25:25 (eastern)							
	Kissimmee, FL 34745								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:357							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: Clerk of the Court ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an ☐ Check here if no other IE or EC reports will be filed 								
	individual making electioneering communications)	·							
	(5) Report	Identifiers							
Cov	er Period: From 6 / 1 / 2019 To	6 / 30 / 2019 Report Type: M6							
X O	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , ,000	Monetary							
Loans \$, <u>15</u> , <u>000</u> . <u>00</u>		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$,15 , _00000	Total Monetary \$. 0 . 00							
In-Ki	ind \$, , 0.00	Total Monetary \$, , , 0 . 00							
		(8) Other Distributions \$, , 000							
(9)	TOTAL Monetary Contributions To Date \$,25 ,27732	(10) TOTAL Monetary Expenditures To Date \$, , 000							
(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 Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		x							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameArm	nando R. R	amirez			(2	!) I.D. Number _		357	
	6/1/2019	9		6/30/	2019				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
6/11/2019	Ramirez, Armando PO Box 451052 Kissimmee , Fl 34745	S	clerk of court	LO			\$5,000.0
6/13/2019	Ramirez, Armando PO Box 451052 Kissimmee, Fl 34745	S	clerk of court	LO			\$5,000.00
6/20/2019	Ramirez, Armando PO Box 451052 Kissimmee, Fl 34745	S	clerk of court	LO			\$5,000.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Armando R. Ramirez (2) I.D. Number 357									
	6/1/2019 6/30 /through/)/2019	4) Page <u>1</u>		0				
(5) Date (6) Sequence Number	(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)	(11) Amount				
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