

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jack Mariano

Name

(2) 8116 Greenside Ln

Address (number and street)

Hudson, FL 34667

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 1145

### OFFICE USE ONLY

ONLINE SUBMISSION

[1187887]

Submitted on:

5/10/2019 14:11:57 (eastern)

(4) Check appropriate box(es):

☒ Candidate Office Sought: County Commissioner District 5

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

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

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 4 / 1 / 2019 To 4 / 30 / 2019 Report Type: M4

☒ Original

☐ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 500 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 500 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 481 . 52

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 481 . 52

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 500 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 481 . 52

### (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 Jack Mariano (2) I.D. Number 1145  
 4/1/2019 through 4/30/2019  
 (3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (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
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
4/3/2019 / /	SK Somboutmai, LLC, 4447 Gall Blvd Zephyrhills, FL 33542	B	restaurant	CH			\$500.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jack Mariano

(2) I.D. Number 1145

(3) Cover Period 4/1/2019 through 4/30/2019

(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
4/14/2019 / /	Cares, 12417 Clock Tower Pkwy Hudson, Fl 34667	#98 event sponsor	MO		\$400.00
1					
4/19/2019 / /	Suntrust Bank, P.O. Box 305183 Nashville, Tn 37230-5183	check order	MO		\$81.52
2					
/ /					
/ /					
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/ /					
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/ /					