

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

<p>(1) <u>Salvatore Paradiso</u> <b>Name</b></p> <p>(2) <u>19640 Bergenfeld Dr, Land O Lakes, FL 34638</u> <b>Address (number and street)</b></p> <p>_____ <b>City, State, Zip Code</b></p>	<p><b>OFFICE USE ONLY</b>      83</p>
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**CHECK IF ADDRESS HAS CHANGED**      (3) ID Number: \_\_\_\_\_

(4) **Check appropriate box(es):**

<input checked="" type="checkbox"/> Candidate (office sought): <u>CDD Oakstead, Seat 4</u>	<input type="checkbox"/> <b>CHECK IF PC HAS DISBANDED</b>
<input type="checkbox"/> Political Committee	<input type="checkbox"/> <b>CHECK IF CCE HAS DISBANDED</b>
<input type="checkbox"/> Committee of Continuous Existence	
<input type="checkbox"/> Party Executive Committee	
<input type="checkbox"/> Electioneering Communication	<input type="checkbox"/> <b>CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED</b>

**(5) REPORT IDENTIFIERS**

Cover Period: From 10/14/2006 To 11/2/2006 / \_\_\_\_\_ Report Type G4-06

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$ <u>160.00</u>
Loans	\$ <u>0.00</u>
Total Monetary	\$ <u>160.00</u>
In-Kind	\$ <u>0.00</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$ <u>140.97</u>
Transfers to Office Account	\$ <u>0.00</u>
Total Monetary	\$ <u>140.97</u>

**(8) Other Distributions**

\$ 0.00

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

\$ 360.00

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

\$ 332.97

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.)    <input type="checkbox"/> Treasurer    <input type="checkbox"/> Deputy Treasurer</p> <p><b>X</b> _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate    <input type="checkbox"/> Chairperson (only for PC, PTY &amp; electioneering commun. organization)</p> <p><b>X</b> _____</p> <p>Signature</p>
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Salvatore Paradiso (2) I.D. Number 83

10/14/2006 through 11/2/2006

(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
10/22/2006 / /	PARADISO, MARIA P 19640 BERGENFELD DRIVE LAND O LAKES, FL 34638	I	chef, pasco county sc	CH			\$160.00
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Salvatore Paradiso

(2) I.D. Number 83

(3) Cover Period 10/14/2006 through 11/2/2006

(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					
10/23/2006 //	STAPLES, STAPLES 15110 N/ DALE MABRY TAMPA, FL 33618	flyers	MO		\$140.97
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