

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Pablo A. Gastaldi
Name

(2) 9430 live Oak Place #102
Address (number and street)

Davie, FL, 33324
City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

12-07-15A11:59 RCVD

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate Office Sought: Councilmember District 2

Political Committee (PC)

Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded

Party Executive Committee (PTY) Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 11 / 01 / 2015 To 11 / 30 / 2015 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 0

Loans \$ _____ , _____ , 50 . 00

Total Monetary \$ _____ , _____ , 0 . 0

In-Kind \$ _____ , _____ , 0 . 0

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 0 . 0

Transfers to Office Account \$ _____ , _____ , 0 . 0

Total Monetary \$ _____ , _____ , 0 . 0

(8) Other Distributions

\$ _____ , _____ , 0 . 0

(9) TOTAL Monetary Contributions To Date

\$ _____ , _____ , 50 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , _____ , 0 . 0

(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) Pablo A. Gastaldi

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X Pablo A. Gastaldi
Signature

(Type name) Pablo A. Gastaldi

Candidate Chairperson (only for PC and PTY)

X Pablo A. Gastaldi
Signature