

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) LUIS H. PRADA  
Name

(2) 1410 S. OCEAN DR 1604  
Address (number and street)

Hollywood FL 33019  
City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: COMMISSIONER DISTRICT 1
- 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 11/02/18 To 02/24/19 Report Type: 2018-TR

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

In-Kind \$ \_\_\_\_\_

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_, 423.57

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, 423.57

### (8) Other Distributions

\$ \_\_\_\_\_

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 6,600.00

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 6,600.00

### (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) LUIS H. PRADA

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

[Signature]  
Signature

(Type name) LUIS H. PRADA

Candidate  Chairperson (only for PC and PTY)

[Signature]  
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name LUIS H. PRADA (2) I.D. Number 2018-TR

(3) Cover Period 11 102 118 through 01 104 118 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
<u>11 / 10 / 18</u>	<u>_____</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>
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**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name LUIS H. PRADA (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 11 102 18 through 02 104 19 (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					
11/15/18	LUIS H. PRADA 1410 S. OCEAN DR 1604 Hollywood FL 33019	PAY LOANS	DIS	-	423.57
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