

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Peter D Hernandez  
 Name  
 (2) 2639 Monroe Street  
 Address (number and street)  
Hollywood FL. 33020  
 City, State, Zip Code

**OFFICE USE ONLY**

Check here if address has changed (3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es): Commissioner District 2

Candidate Office Sought: \_\_\_\_\_  
 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 4 / 1 / 16 To 4 / 30 / 16 Report Type: M4/16

Original  Amendment  Special Election Report

**(6) Contributions This Report**

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

Loans \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . 0

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . 0

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

**(7) Expenditures This Report**

Monetary Expenditures \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . 0

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

Total Monetary \$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . 0

**(8) Other Distributions**

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . \_\_\_\_\_

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

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . 10,000.00

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

\$ \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ . 26.00

### (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:

Jamie Mardis  
 (Type name)

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

X \_\_\_\_\_  
 Signature

Peter D Hernandez  
 (Type name)

Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

**CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

Peter D Hernandez

**(1) Name** \_\_\_\_\_ **(2) I.D. Number** \_\_\_\_\_

**(3) Cover Period** 4 / 1 / 2016 through 4 / 30 / 2016 **(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
/ /	NONE						
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MAY 13 2016

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Peter D Hernandez

(2) I.D. Number M4/2016

(3) Cover Period 4 / 1 / 2016 through 4 / 30 / 2016

(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
/ /	NONE				
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