

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Lorenzo Wood
Name

(2) 730 Holly Street
Address (number and street)

N. Lauderdale, FL 33068
City, State, Zip Code

OFFICE USE ONLY

RECEIVED

APR 10 2018

CITY NORTH LAUDERDALE *JAB*

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

(4) Check appropriate box(es):

Candidate Office Sought: City Commissioner District A

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 3/01/18 To 3/31/18 Report Type: M3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 00.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 28.15

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 28.15

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 6.100.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 68.20

(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) Lorenzo Wood

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

(Type name) Lorenzo Wood

Candidate Chairperson (only for PC and PTY)

Lorenzo Wood
Signature

Lorenzo Wood
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Lorenzo Wood

(2) I.D. Number _____

(3) Cover Period 03/01/18 through 03/31/18

(4) Page _____ of _____

(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					
03/31/18	T. D. Bank 2600 N. University Dr Coral Springs, FL 33065	State fees	CAN		\$ 28.15
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

LW