

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Nadia Assad
 Name
 (2) 8021 NW 47th Court
 Address (number and street)
Lauderhill FL 33351
 City, State, Zip Code

OFFICE USE ONLY
RECEIVED
 FEB 10 2020
 CITY CLERK'S OFFICE

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Lauderhill Commission Seat #3
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 01 / 01 / 2020 To 01 / 31 / 2020 Report Type: MI

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 150.00

Loans \$, , .

Total Monetary \$, , 150.00

In-Kind \$, , .

(7) Expenditures This Report

Monetary Expenditures \$, , 10.00

Transfers to Office Account \$, , .

Total Monetary \$, , 10.00

(8) Other Distributions

\$, , .

(9) TOTAL Monetary Contributions To Date

\$, 3,569.02

(10) TOTAL Monetary Expenditures To Date

\$, 2,663.14

(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) NADIA ASSAD

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

Nadia Assad
 Signature

(Type name) Nadia Assad

Candidate Chairperson (only for PC and PTY)

Nadia Assad
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Nadia Assad (2) I.D. Number _____

(3) Cover Period 01 / 01 / 20 through 01 / 31 / 20 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
01, 17, 20	Nirya Invet ment Corp 16312 SW 16th St Pembroke Pines FL 33027	B	Lawyer	CHE			\$150.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name _____

(2) I.D. Number _____

(3) Cover Period 01/01/20 through 01/31/20

(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					
1	1/31/20	Wells Fargo Bank	Monthly Service Fee	CAN	\$10.00
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