

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Mitch Anton
 Name
 (2) 1900 Van Buren Street Apt 502
 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):

- Candidate Office Sought: City Commissioner - 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 3/1/2019 / ____ To 3/31/2019 / ____ Report Type: 2019M3

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

\$ 0 , ____ , ____ . ____

(9) TOTAL Monetary Contributions To Date

\$ 0 , ____ , ____ . ____

(10) TOTAL Monetary Expenditures To Date

\$ 0 , ____ , ____ . ____

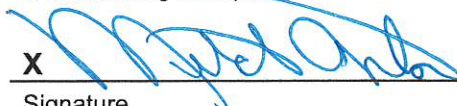
(11) Certification

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) Mitch Anton

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

X 
 Signature

(Type name) Mitch Anton

Candidate Chairperson (only for PC and PTY)

X 
 Signature