CAMPAIGN TREASURER'S REPORT SUMMARY	
(1) Lorry Woods Campaign	OFFICE USE ONLY
Name	00 15 7
(2) <u>PO Box 347921</u>	
Address (number and street) Miami, FL 33234	С F 6 28 6 7 М
City, State, Zip Code	
Check here if address has changed	(2) ID Number
(4) Check appropriate box(es):	
Candidate Office Sought: City Commissioner - District 2	
Political Committee (PC)	
Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Check here if PC or ECO has disbanded Check here if PTY has disbanded	
Independent Expenditure (IE) (also covers an Check here if no other IE or EC reports will be filed	
individual making electioneering communications)	
(5) Report Identifiers	
Cover Period: From 03 / 01 / 2015 To	03 / 31 / 2015 Report Type: M3
□ Original	
(6) Contributions This Report	(7) Expenditures This Report
5 474 50	Monetary
Cash & Checks \$,5 , 474 . 50	Expenditures \$,3, <u>325</u> . 05
Loans \$,,0.00	Transfers to
	Office Account \$, , 0.00
Total Monetary \$, 5,474.50	
	Total Monetary \$, 3, 325.05
In-Kind \$,, 000	
	(8) Other Distributions
	\$, <u>0</u> 00
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$, <u>17</u> , <u>429</u> . <u>50</u>	\$, <u>8, 684</u> . <u>42</u>
(11) Contification	
(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) Margarita M. Fernandez (Type name) Lorry Woods	
Individual (only for IE / Treasurer Deputy Treasurer or electioneoring comm.)	Candidate Chairperson (only for PC and PTY)
X CIPE OF SLIX HOME	
Signature	Signature
	THOUSE SEE REVERSE FOR INSTRUCTIONS
FIRST AMENDMENT	