

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

RECEIVED
2006 JUL 10 PM 12:05
CLERK OF MIAMI, FL
JILL A. THOMPSON

(1) Tomas P. Regalado
Name
(2) 2424 S.W. 20th Street
Address (number and street)
MIAMI, Florida 33145
City, State, Zip Code

OFFICE USE ONLY

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 7 0

(4) Check appropriate box(es):

☒ Candidate (office sought):

☐ Political Committee

☐ Committee of Continuous Existence

☐ Party Executive Committee

☐ Electioneering Communication

Commissioner, District 4

☐ CHECK IF PC HAS DISBANDED

☐ CHECK IF CCE HAS DISBANDED

☐ CHECK IF NO OTHER ELECTIONEERING
COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 4/1/06 To 6/30/06 Report Type 02

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0

Loans \$ 100.00

Total Monetary \$ 100.00

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
\$ 100.00

(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)

☐ Individual (only for electioneering commun.)

☒ Treasurer

☐ Deputy Treasurer

X Tomas Regalado
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☒ Candidate

☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X Tomas Regalado
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name TOMAS P REGALADO (2) I.D. Number —

(3) Cover Period 4 / 06 through 6 / 30 / 06 (4) Page — of —

(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
(6) Sequence Number		Type	Occupation			
/ /	TOMAS REGALADO 2424 SW 20 ST MIAMI, FL 33145		COMM	LOA	—	\$100.00
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 CITY CLERK
 CITY OF MIAMI



CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name TOMAS P REGALADO

(2) I.D. Number

(3) Cover Period 4 / 1 / 06 through 6 / 30 / 06

(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	(10)	(11)
(6) Sequence Number				Amendment	Amount
<u> / / </u>	<u>NONE</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
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