

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Justin Lopez (2) I.D. Number _____

(3) Cover Period 5 / 27 / 20 through 6 / 10 / 20 (4) Page 1 of 1

(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	Type	Description	Amendment	Amount
5 / 27 / 20	Lopez, Justin, V 9961 Chiana Cir Fort Myers, FL 33905	LOA	Driver	LOA			\$500.00
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