

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) ELIZABETH TRICOCHÉ  
 Name  
 (2) 1140 102 STREET UNIT 4  
 Address (number and street)  
BAY HARBOR ISLANDS, FL 33154  
 City, State, Zip Code

OFFICE USE ONLY

Check here if address has changed

(3) ID Number: 392

(4) Check appropriate box(es):  
 Candidate    Office Sought: COUNCIL MEMBER  
 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 06/01/2020/ To 06/12/2020/ Report Type: G8  
 Original     Amendment     Special Election Report

(6) Contributions This Report

Cash & Checks    \$ 0.00, \_\_\_\_, \_\_\_\_. \_\_\_\_  
 Loans    \$ 0.00, \_\_\_\_, \_\_\_\_. \_\_\_\_  
 Total Monetary    \$ 0.00, \_\_\_\_, \_\_\_\_. \_\_\_\_  
 In-Kind    \$ 0.00, \_\_\_\_, \_\_\_\_. \_\_\_\_

(7) Expenditures This Report

Monetary Expenditures    \$ 100.00, \_\_\_\_, \_\_\_\_. \_\_\_\_  
 Transfers to Office Account    \$ 0.00, \_\_\_\_, \_\_\_\_. \_\_\_\_  
 Total Monetary    \$ 0.00, \_\_\_\_, \_\_\_\_. \_\_\_\_

(8) Other Distributions  
 \$ 0.00, \_\_\_\_, \_\_\_\_. \_\_\_\_

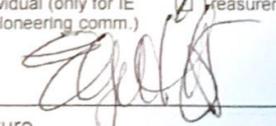
(9) TOTAL Monetary Contributions To Date  
 \$ 4350.00, \_\_\_\_, \_\_\_\_. \_\_\_\_

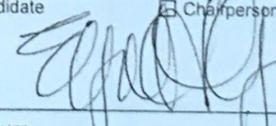
(10) TOTAL Monetary Expenditures To Date  
 \$ 1722.01, \_\_\_\_, \_\_\_\_. \_\_\_\_

### (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) ELIZABETH TRICOCHÉ  
 Individual (only for IE or electioneering comm.)     Treasurer     Deputy Treasurer  
X   
 Signature

(Type name) ELIZABETH TRICOCHÉ  
 Candidate     Chairperson (only for PC and PTY)  
X   
 Signature

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name ELIZABETH TRICOCHÉ

(2) I.D. Number 392

(3) Cover Period 06/01/2020 /          /          through 06/12/2020 /          /         

(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
06/11/2020 98-1	LITTLE THINGS PHOTOGRAPHY 7329 SW 162ND PATH MIAMI, FL 33193	CAMPAIGN PHOTO RESERVATION	DIS		100.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name ELIZABETH TRICOCHÉ

(2) I.D. Number 392

(3) Cover Period 06/01/2020 /      /      through 06/12/2020 /      /     

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
/ /	N/A						
/ /							
/ /							
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