

CITY OF FORT LAUDERDALE

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2021 NOV 8 AM 11:15

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CAMPAIGN TREASURER'S REPORT SUMMARY

CITY CLERK'S OFFICE

OFFICE USE ONLY

(1) Ted Ingera  
 Name

(2) 901 SW 19th St.  
 Address (number and street)

Ft. Land, FL 33315  
 City, State, Zip Code

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

- Candidate Office Sought: Dist 4 City Commissioner
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)

- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 11 / 1 / 24 To 2 / 2 / 25 Report Type: TR-G

- Original
- Amendment
- Special Election Report

(6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_ 0

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

In-Kind \$ \_\_\_\_\_

(7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ 6.17

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

(8) Other Distributions \$ \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date \$ \_\_\_\_\_ 4,392.00

(10) TOTAL Monetary Expenditures To Date \$ \_\_\_\_\_ 4,392.00

(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) Ted Ingera

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

X Ted Ingera  
 Signature

(Type name) Ted Ingera

Candidate  Chairperson (only for PC and PTY)

X Ted Ingera  
 Signature

**CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name Ted Inerra (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11 / 1 / 24 through 2 / 2 / 25 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
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/ /							
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**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Ted + n serra (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11/1/24 through 2/2/25 (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
11/3/24	UPS store southland S.C.		DIS		6.17
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					
1/1					

### CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Ted Inserna (2) I.D. Number \_\_\_\_\_

(3) Cover Period 11/1/24 through 2/2/25 (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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
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