

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

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OFFICE OF THE CITY CLERK
CITY OF MIAMI, FL

(1) Palomino, Rosa Maria
Name

(2) 2852 SW 33rd Ct
Address (number and street)

Miami, FL 33133
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): City of Miami District 2 Commissioner
- Political Committee
- Committee of Continue Existence
- Party Executive Committee
- Electioneering Communication

- 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 04 / 01 / 15 To 04 / 30 / 15 Report Type M4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>350.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>350.00</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>631.50</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>631.50</u>

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 10,080.00

(10) TOTAL Monetary Expenditures To Date

\$ 4,607.08

(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.

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

Rosa Maria Palomino
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Rosa Maria Palomino
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Rosa Maria Palomino
Signature

X Rosa Maria Palomino
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) **Name** Palomino, Rosa Maria (2) **I.D. Number** _____

(3) **Cover Period** 04 / 01 / 15 through 04 / 30 / 15 (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
04 / 21 / 15	Brinker, Mary 3503 Oaks Way Apt 309 Pompano Beach, FL 33069	I		CHE			100.00
000001							
04 / 30 / 15	Karski, Steven 335 S Biscayne Blvd Apt 2407 Miami, FL 33131	I	Pharmaceutical Sales	CHE			250.00
000002							
/ /							
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 CITY OF MIAMI, FL

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1)

(2) I.D. Number _____

Name Palomino, Rosa Maria

(3) Cover Period 04 / 01 / 15 through 04 / 30 / 15

(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
(6) Sequence Number					
04 / 16 / 15	Thor Media LLC 1925 Brickell Ave Apt D1604 Miami, FL 33129	Campaign Coordination	MON		500.00
000001					
04 / 30 / 15	Habana Vieja Restaurant 2475 SW 37th Ave Miami, FL 33145	Campaign Event	MON		131.50
000002					
/ /					
/ /					
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/ /					
/ /					

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