

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

**RECEIVED**  
2013 OCT 2 PM 1:51  
OFFICE OF THE CITY CLERK  
CITY OF MIAMI, FL

(1) Frank Carollo Campaign  
Name

(2) P.O. Box 440722  
Address (number and street)

Miami, FL 33144-0000  
City, State, Zip Code

☐ Check box if address has changed

(3) I.D. Number: 00000

(4) Check appropriate box(es):

- ☒ Candidate (office sought): City of Miami Commissioner, District 3
- ☐ Political Committee ☐ Check if PC has DISBANDED
- ☐ Committee of Continuous Existence ☐ Check if CCE has DISBANDED
- ☐ Party Executive Committee ☐ Check if no other electioneering communication reports will be filed
- ☐ Electioneering Communication

**(5) REPORT IDENTIFIERS**

Cover Period: From 09/26/2009 To 10/09/2009 Report Type: G2

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

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$7,750.00

Loans \$0.00

Total Monetary \$7,750.00

In-Kind \$331.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$32,010.13

Transfers to Office Account \$0.00

Total Monetary \$32,010.13

(8) Other Distributions \$0.00

**(9) TOTAL Monetary Contributions to Date**

\$178,905.24

**(10) TOTAL Monetary Expenditures to Date**

\$73,145.74

**(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

Jose A. Riesco

☐ Individual (only for electioneering commun.) ☒ Treasurer ☐ Deputy Treasurer

**X**

Signature

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

Frank Carollo

☒ Candidate ☐ Chairman (only for PC, PTY & electioneering commun. organization)

**X**

Signature

**FIRST AMENDMENT**  
TO REPORT FOR PERIOD  
FROM 9/24/9 TO 10/9/9

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Frank Carollo Campaign (2) I.D. Number 00000  
 (3) Cover Period 09 / 26 / 2009 through 10 / 09 / 2009 (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
10 / 07 / 09	Bank Atlantic P.O. Box 8608 Ft. Lauderdale, FL 33310	Bank Fees	CHE	ADD	\$10.00
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RECEIVED  
 2013 JUL -2 PM 1:52  
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FIRST AMENDMENT  
 TO REPORT FOR PERIOD  
 FROM 9/26/9 TO 10/9/9