

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

(1) Carla Ascencio - Savola

**Name**

(2) 8770 Sunset Dr., #443

**Address (number and street)**

Miami, Fl 33173

**City, State, Zip Code**

☐ **CHECK IF ADDRESS HAS CHANGED**

**OFFICE USE ONLY**

**ONLINE SUBMISSION**

(3) ID Number: 577

(4) **Check appropriate box(es):**

☒ **Candidate (office sought):** Community Council 12/122

☐ **Political Committee**

☐ **CHECK IF PC HAS DISBANDED**

☐ **Committee of Continuous Existence**

☐ **CHECK IF CCE HAS DISBANDED**

☐ **Party Executive Committee**

☐ **Electioneering Communication**

☐ **CHECK IF NO OTHER ELECTIONEERING  
COMMUNICATION REPORTS WILL BE FILED**

**(5) REPORT IDENTIFIERS**

Cover Period: From 4/1/2008 To 9/15/2008 / Report Type TR-QC

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

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks      \$ 250.00

Loans                      \$ 0.00

Total Monetary      \$ 250.00

In-Kind                      \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary  
Expenditures      \$ 250.00

Transfers to Office  
Account              \$ 0.00

Total  
Monetary              \$ 250.00

(8) **Other Distributions**  
\$ 0.00

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

\$ 350.00

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

\$ 250.00

**(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)

☐ **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.

(Type name)

☐ **Candidate**    ☐ **Chairperson (only for PC, PTY & electioneering commun. organization)**

**X**

Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Carla Ascencio - Savola (2) I.D. Number 577

4/1/2008

9/15/2008

**(3) Cover Period** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **(4) Page** 1 of 1

[illegible]

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

(1) Name Carla Ascencio - Savola

(2) I.D. Number 577

(3) Cover Period 4/1/2008 through 9/15/2008

(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
6/26/2008 / /	Ascencio-Savola, Carla 7410 SW 82 Ct Miami, Fl 33143	refund	RE		\$25.00
1					
6/26/2008 / /	RP-MDC, 1150 NW 72nd Ave. Miami,, Fl 33126	adv.	MO		\$225.00
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					