

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

(1) Rudy Herbello  
Name

(2) P.O. Box 94277  
Address (number and street)

Miami, FL 33194  
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**

(3) ID Number: 599

(4) Check appropriate box(es):

Candidate (office sought): County Commission 11

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 1/1/2008 To 3/31/2008 Report Type Q1-08

Original  Amendment  Special Election Report  Independent Expenditure 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 \$ 0.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 0.00

(8) Other Distributions \$ 0.00

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

\$ 4,925.00

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

\$ 4,925.00

**(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.

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(Type name) \_\_\_\_\_  
 Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC, PTY & electioneering commun. organization)

**X** \_\_\_\_\_  
Signature

**X** \_\_\_\_\_  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** Rudy Herbello **(2) I.D. Number** 599  
 1/1/2008 through 3/31/2008  
**(3) Cover Period**      /      /      through      /      /      **(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
2/23/2008 / /	Molina, Edmundo L. 3260 N.W. 7th Street Suite 101 Miami, FL 33125	B	doctor	CH		Delete	\$100.00
1							
2/23/2008 / /	Molina, Edmundo L. 3260 N.W. 7th Street Suite 101 Miami, FL 33125	I	doctor	CH		Add	\$100.00
2							
2/23/2008 / /	Rapado, Otto 165 Madeira Avenue Coral Gables, FL 33134	I	self-empl oyed	CH		Delete	\$150.00
3							
2/23/2008 / /	Rapado, Otto 165 Madeira Avenue Coral Gables, FL 33134	I	consultant	CH		Add	\$150.00
4							
/ /							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Rudy Herbello

(2) I.D. Number 599

(3) Cover Period 1/1/2008 through 3/31/2008

(4) Page 1 of 0

(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					
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