FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY (1) Rebeca Sosa **(2)** Candidate, Committee or Party Name I.D. Number (3) ____6386 SW 10th Street, Miami, FL 33144 Address (number and street) State Zip Code Check box if address has changed since last report (4) Check appropriate box(es): X Candidate (office sought) County Commission 06 Political Committee Check if PC has DISBANDED Committee of Continuous Existance Check if CCE has DISBANDED ☐ Party Executive Committee (5) Report Identifiers 4/1/2005 - 6/30/2005 Report Type: Q2-05 Cover Period: Original X Amendment Special Election Report Independent Expenditure Report (6) CONTRIBUTIONS THIS REPORT (7) EXPENDITURES THIS REPORT Monetary \$ _____0.00 \$ _____0.00 Cash & Checks **Expenditures** Transfers to Office \$_____0.00 \$_____0.00 Loans Account \$____0.00 Total Monetary Total Monetary \$_____0.00 (8) Other Distributions In Kind (9) TOTAL Monetary Contributions to Date (10) TOTAL Monetary Expenditures to Date 91,534.00 500.00 (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 I certify that I have examined this report and it is true, correct and complete. true, correct and complete. Name of Treasurer Deputy Treasurer Name of Candidate Chairman (PC/PTY)

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Rebeca Sosa (2) I.D. Number ______359 (3) Cover Period $\frac{4/1/2005 - 6/30/2005}{}$ (4) Page _____1 of ___1 (11) (5) (9) (10)(12)**(7)** (8) **Full Name** Date (Last, Suffix, First, Middle) Contributor (6) Sequence **Street Address &** Contribution In-kind Number City, State, Zip Code Type Occupation Description Amendment Type Amount Asbel, Sharon executive СН Delete \$250.00 6/13/2005 15345 SW 77th Court Miami, FL 33157 management 1 Asbel, Sharon Ι executive СН Add \$250.00 6/13/2005 15345 SW 77th Court at Miami, FL 33157 property mgmt co 2

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name_Rebeca Sosa			I.D. Number	r359_	
(3) Cover Period 4/1/2005 - 6/30/2005			Page	1 of _	0
(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if) contribution to a candidate	Expenditure Type	Amendment	Amount