FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
 (1) <u>Catherine Pooler</u> Candidate, Committee or Party Name (3) 73 W. Flagler Street, # 1015, Miami 	(2) <u>367</u> I.D. Number					
	City State Zip Code					
(4) Check appropriate box(es):						
X Candidate (office sought) County Cou	—					
Political Committee						
 Committee of Continuous Existance Party Executive Committee 	Check if CCE has DISBANDED					
(5) Report Identi	ifiers					
Cover Period: 7/1/2005 - 9/30/2005	Report Type:Q3-05					
Original X Amendment Special Election R	eport Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT Monetary					
Cash & Checks \$500.00	Expenditures \$0.00					
Loans \$0.00_	Transfers to Office Account \$0.00					
Total Monetary \$500.00	Total Monetary \$0.00_					
In Kind \$500.00_	(8) Other Distributions \$0.00_					
(9) TOTAL Monetary Contributions to Date	(10) TOTAL Monetary Expenditures to Date					
\$ <u>57,360.00</u>	\$ <u>4,337.24</u>					
(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.					
Name of Treasurer Deputy Treasurer	Name of Candidate Chairman (PC/PTY)					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name_Catherine Pooler

(3) Cover Period		d <u>7/1/2005 - 9/30/2005</u>	7/1/2005 - 9/30/2005			
	(5)	(7)	(8)			
	Date	Full Name	Contributor			

(3) Cover Perio	d <u>7/1/2005 - 9/30/2005</u>			_ (4)	Page	<u> </u>	1
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		Contributor Occupation	Contribution Type		Amendment	Amount
9/29/2005	Carlos Lopez,PA, 799 Brickell Plaza Miami, Fl 33131		lawyer	СН	fundraise		\$500.00
1							
9/29/2005	Carlos Lopez,PA, 799 Brickell Plaza Miami, Fl 33131	В	lawyer	IK	fundraise	er Add	\$500.00
2							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Cath	erine Pooler		(2) I.D. Number			
(3) Cover Period	d 7/1/2005 - 9/30/2005	(4)	Page	<u>_1</u> of _	0	
(5)	(7)	(8)	(9)	(10)	(11)	
Date (6) Sequence	Full Name (Last, Suffix, First, Middle) Street Address &	Purpose (add office sought if) contribution to a	Expenditure			
Number	City, State, Zip Code	candidate	Туре	Amendment	Amount	