FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Millie Herrera	OFFICE USE ONLY 465						
Name							
(2) 11445 SW 74 Street, Miami, FL 33173							
Address (number and street)							
City, State, Zip Code							
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:						
(4) Check appropriate box(es):  X Candidate (office sought): County Commiss	ion 10						
☐ 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	6/30/2006 / Report Type Q2-06						
☐ Original	Report Independent Expenditure Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$0.00	Monetary Expenditures \$ 0.00						
Loans \$	Transfers to Office Account \$ 0.00						
Total Monetary \$	Total Monetary \$ 0.00						
In-Kind \$							
	(8) Other Distributions \$0.00						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
•	\$						
17,255.00	17,248.46						
(11) CERT	IFICATION						
It is a first degree misdemeanor for any pers	on 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.							
(Type name) (Type name)							
Individual (only for election eering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)						
X	X						
Signature	Signature						

## **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name	Millie Herrera				z) I.D. Numbe	er <u>4</u>	65
	4/1/2006		6	/30/2006			
(3) Cover Perio	od//	thro			(4) Pag	<b>e</b> 1	of <sup>0</sup>
(c) Cover rem	<b></b> · ·				(., . ag	-	-
(E)	(7)		(0)	(0)	(40)	(4.4)	(40)
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ntributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1							
1 1							
1 1							
1							
1 1							
I I							
1							
1 3							
1 1							
1 1							

DS-DE 13 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name Mill	ie	Herrer	a				 (2) I.D. Nun	nber	4	465	3
		4/1/200	06		6/30/2	006		-			
(3) Cover Period	ŀ	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
6/8/2006	Pereira, Carlos 45 NW 27th Ave. Miami, FL 33125	fundraisi ng supplies	MO	Delete	\$150.00
6/8/2006	Pereira, Carlos 45 NW 27th Ave. Miami, FL 33125	reimburse for rental of tables and chairs	МО	Add	\$150.00
6/13/2006	Pereira, Carlos 45 NW 27th Ave. Miami, FL 33125	reimb. expenses	МО	Delete	\$276.26
6/13/2006	Pereira, Carlos 45 NW 27th Ave. Miami, FL 33125	reimburse sodas, food, water, plates, cups	МО	Add	\$276.26
6/13/2006	Pereira, Carlos 45 NW 27th Ave. Miami, FL 33125	consulting and expenses	МО	Delete	\$677.65
6/13/2006	Pereira, Carlos 45 NW 27th Ave. Miami, FL 33125	consulting fee and reimb for gasoline	МО	Add	\$677.65
//					,
/ /					