

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

(1) Alvin L. Combs

**Name**

(2) 8020 NE 4th Avenue, Miami, FL 33138

**Address (number and street)**

**City, State, Zip Code**

**CHECK IF ADDRESS HAS CHANGED**

(3) ID Number: \_\_\_\_\_

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

Candidate (office sought): Community Council 07/73

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 7/1/2006 To 7/28/2006 / Report Type F1-06

Original     Amendment     Special Election Report     Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks    \$ 100.00

Loans    \$ 0.00

Total Monetary    \$ 100.00

In-Kind    \$ 0.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures    \$ 135.00

Transfers to Office Account    \$ 0.00

Total Monetary    \$ 135.00

(8) Other Distributions    \$ 0.00

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

\$ 100.00

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

\$ 135.00

**(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)

(Type name)

Individual (only for electioneering commun.)     Treasurer     Deputy Treasurer

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

**X**

**X**

Signature

Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

**(1) Name** Alvin L. Combs **(2) I.D. Number** 515  
**(3) Cover Period** 7/1/2006 through 7/28/2006 **(4) Page** 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
7/17/2006 / /	Combs, Alvin L 8020 N.E. 4th Avenue Miami, FL 33138	I		CA			\$100.00
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Alvin L. Combs

(2) I.D. Number 515

(3) Cover Period 7/1/2006 through 7/28/2006

(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) Sequence Number					
7/18/2006 // /	Board of County Commisioners, 2700 N.W. 87th Ave. Miam, Fl 33172	filing fee	MO		\$100.00
1					
7/18/2006 // /	Wachovia Bank, P.O. Box 563966 Charlotte, N. 28262	bank fee	MO		\$35.00
2					
// /					
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