CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) The Latino Vote of South Florida	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1130014]							
(2) 6732 Atlanta Street	Submitted on:							
Address (number and street) Hollywood, FL 33024	10/11/2016 13:00:17 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 336							
(4) Check appropriate box(es):								
Candidate Office Sought:								
I Political Committee (PC)								
Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an	 Check here if PTY has disbanded Check here if no other IE or EC reports will be filed 							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From $10 / 1 / 2016$ To								
	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , 0 . 00	Expenditures \$ _ , _ , 200 . 00							
Loans \$,, <u>0</u> .00	Transfers to							
• • • • • • • • • • • • • • • • • • •	Office Account \$,, 0 . 00							
Total Monetary \$,, 0.00	Total Monetary \$, 200.00							
In-Kind \$,,0.00	Total Monetary \$,, 200 . 00							
In-Kind \$,, 0.00	(8) Other Distributions							
	\$,,,0.							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>13</u> , <u>000</u> . <u>00</u>	\$, <u>5</u> , <u>451</u> . <u>00</u>							
(11) Ce	rtification							
	son 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:								
(Type name)	(Type name)							
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
X	X							
Signature	Signature							

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	The Latino Vote of South Florida (2) I.D. Number 336						36
	10/1/2016		1	0/7/2016			
(3) Cover Peri	od / /	thro	ough	l l	(4) Pag	e _1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
1 1							
1 1	-						
1 1							
1 1							
1 1							
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name The	CAMPAIGN TREASURER	orida) EXPENDIT 2) I.D. Number	336	
(3) Cover Period	10/1/2016 I/through_	10/7/2016 //	4) Page <u>1</u>	of	1
(5) Date (6) Sequence Number	(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
10/7/2016	Pearce, Lascelle 8986 NW 6th Court Plantation, FL 33324	public relations	МО		\$200.00
_/ /					
_/ /					
11					
_/ /					
_/ /					
11					
11					

DS-DE 14 (Rev. 11/13)

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