

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

(1) Richard M. Gomez
Name
(2) 10040 SW 33 Street
Address (number and street)
Miami, FL 33165
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1025955]
Submitted on:
11/24/2010 12:00:26 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 811

(4) Check appropriate box(es):
 Candidate (office sought): Community Council 10/103
 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 8/20/2010 To 11/22/2010 Report Type TR-F1
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00
 Loans \$ 0.00
 Total Monetary \$ 0.00
 In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 500.00
 Transfers to Office Account \$ 0.00
 Total Monetary \$ 500.00

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 3,827.00

(10) TOTAL Monetary Expenditures To Date
 \$ 3,827.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p>X _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)</p> <p>X _____</p> <p>Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Richard M. Gomez (2) I.D. Number 811

8/20/2010 through 11/22/2010

(3) Cover Period / / through / / (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Richard M. Gomez

(2) I.D. Number 811

(3) Cover Period 8/20/2010 through 11/22/2010

(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					
11/22/2010 / /	Gomez, Richard M 10040 SW 33 St Miami, FL 33165	reimbursement	RE		\$500.00
1					
11/22/2010 / /	Amigos For Kids, 801 SW 3 Avenue, Suite 300 Miami, FL 33130	nfp contribution	DI		\$788.56
2					
/ /					
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