

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

(1) Ivonne Cuesta
Name
(2) P.O. Box 140186
Address (number and street)
Coral Gables, FL 33114-0186
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1053562]
Submitted on:
3/9/2013 22:01:04 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 1021

(4) Check appropriate box(es):
 Candidate (office sought): County Court Judge Group 27
 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 8/10/2012 To 11/12/2012 Report Type TR-F
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>500.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>500.00</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>0.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 78,034.31

(10) TOTAL Monetary Expenditures To Date
\$ 79,226.66

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

(1) Name Ivonne Cuesta **(2) I.D. Number** 1021
 8/10/2012 through 11/12/2012
(3) Cover Period / / through / / **(4) Page** 1 of 1

(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
9/10/2012 / /	City of North Miami Beach, 17011 NE 19 Avenue No. Miami Beach, FL 33162	B	political signage bond	RE		Add	\$250.00
1							
10/1/2012 / /	City of Hialeah, 501 Palm Avenue Hialeah, FL 33010	B	political signage bond	RE		Add	\$150.00
2							
10/12/2012 / /	Florida City, 404 W. Palm Drive Florida City, FL 33034	B	political signage bond	RE		Add	\$100.00
3							
/ /							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ivonne Cuesta

(2) I.D. Number 1021

(3) Cover Period 8/10/2012 through 11/12/2012

(4) Page 1 of 0

(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					
/ /					
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