

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

(1) Joe Martinez
Name
(2) c/o Federico Garcia
Address (number and street)
Miami, FL 33155
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
[1044520]
Submitted on:
9/17/2012 12:28:03 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 1097

(4) Check appropriate box(es):
 Candidate (office sought): Mayor 2012
 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 4/1/2012 / 7/6/2012 / To 7/6/2012 / Report Type F1-12

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

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 314,500.50

(10) TOTAL Monetary Expenditures To Date
\$ 298,334.66

(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 Joe Martinez (2) I.D. Number 1097
 4/1/2012 through 7/6/2012
 (3) Cover Period / / through / / (4) Page 1 of 2

(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
7/3/2012 / /	Ferre-Prida, Arney Jesus 13955 SW 56 Terrace Miami, FL 33183	I	sales	CH		Delete	\$200.00
1							
7/3/2012 / /	Ferre-Prida, Arney Jesus 13955 SW 56 Terrace Miami, FL 33183	I	director	CH		Add	\$200.00
2							
7/3/2012 / /	Condecies, Orlando A 5835 West 16 Ave Hialeah, FL 33012	I	sales	MO		Delete	\$500.00
3							
7/3/2012 / /	Condecies, Orlando A 5835 West 16 Ave Hialeah, FL 33012	I	office manager	MO		Add	\$500.00
4							
7/3/2012 / /	Martinez, Antonio 14555 SW 43 Terrace Miami, FL 33175	I	sales	CH		Delete	\$500.00
5							
7/3/2012 / /	Martinez, Antonio 14555 SW 43 Terrace Miami, FL 33175	I	real estate attorney	CH		Add	\$500.00
6							
7/3/2012 / /	Borges, Diani 90 SW 3 Street Miami, FL 33130	I	sales	CH		Delete	\$500.00
7							
7/3/2012 / /	Borges, Diani 90 SW 3 Street Miami, FL 33130	I	office manager	CH		Add	\$500.00
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Joe Martinez (2) I.D. Number 1097
 4/1/2012 through 7/6/2012
 (3) Cover Period / / through / / (4) Page 2 of 2

(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
(6) Sequence Number							
7/3/2012 / /	Gonzalez, Yanisley 850 W 67 St Hialeah, FL 33012	I	sales	CH		Delete	\$200.00
9							
7/3/2012 / /	Gonzalez, Yanisley 850 W 67 St Hialeah, FL 33012	I	company director	CH		Add	\$200.00
10							
4/30/2012 / /	Tablada, Elena 3920 Monserrate St Coral Gables, FL 33134	I	sales	CH		Delete	\$500.00
11							
4/30/2012 / /	Tablada, Elena 3920 Monserrate St Coral Gables, FL 33134	I	company president	CH		Add	\$500.00
12							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Joe Martinez

(2) I.D. Number 1097

(3) Cover Period 4/1/2012 through 7/6/2012

(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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