CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Michaelle Gonzalez-Paulson	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	815 N Homestead Boulevard; Suite 321	Submitted on:								
	Address (number and street)	2/9/2016 21:47:31 (eastern)								
	Homestead, FL 33030									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1451								
(4)	(4) Check appropriate box(es):									
	 ☐ Candidate Office Sought: County Court Judge Group 11 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 									
	(5) Report	Identifiers								
Cove	er Period: From $\underline{1}$ / $\underline{1}$ / $\underline{2016}$ To									
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , <u>250</u> . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , <u>250</u> . <u>00</u>	Total Manatani, C								
In-Ki	ind \$,, <u>0</u> . <u>00</u>	Total Monetary \$, , 695 . 55								
		(8) Other Distributions \$, , 000_								
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc									
(T	(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) Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)									
<u>X</u>		X								
51	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Michaelle Gonzalez-	Pauls	on		2) I.D. Numbe	r1	451
	1/1/2016			/31/2016			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	e	of ¹
1000. 98			1900				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
1/4/2016	Lim, Henry	I	attorney	СН			\$250.0
1, 1, 2010	5496 Penway Drive Orlando, FL 32814						
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1 1							
9 9							
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1 1							
J I							
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1 1							
16 N							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Michael	le Gon	ızalez	-Paulson			 (2) I.D. Nun	nber	-	L451	
		1/1/20	16		1/31/2	016					
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
1/4/2016	Pay Pal, PO BOX 45950 Omaha, NE 68145	bank fee	МО		\$7.55
1/5/2016	West Perrine CDC, 17755 Homestead Avenue Ste 102 Miami, FL 33157	martin luther king weekend ad	МО		\$500.00
1/16/2016	JNICK Management Inc., 2425 NW 43RD ST Miami, FL 33142	car magnets	MO		\$125.00
1/16/2016	Pinolanda 3 Corp , 10948 SW 184th St. Miami, FL 33157	campaign volunteer's lunch	МО		\$63.00
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