CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Carlos Gimenez	OFFICE USE ONLY ONLINE SUBMISSION							
	Name	[1122688]							
(2)	1001 Brickell Bay Drive; Suite 1400	Submitted on:							
	Address (number and street)	8/25/2016 15:30:33 (eastern)							
	Miami, FL 33131	`							
	City, State, Zip Code	(2) 17 11							
	Check here if address has changed	(3) ID Number:1454							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: Mayor ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
	(5) Report	t Identifiers							
Cov	er Period: From $11 / 1 / 2015$ To								
	riginal 🖾 Amendment 🗌 Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , , 000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, ,000	Total Monetary \$, 1 ,711 . 48							
In-Ki	ind \$,,								
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date \$ 1 , _646 , _08500	(10) TOTAL Monetary Expenditures To Date \$1 , _275 , _74256							
(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)								
X		X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Carlos Gimenez			(2) I.D. Number				
(2) Carra Bar	11/1/2015	thra	1	1/30/2015	(4) D	sa 1	 0	
(3) Cover Per	iod//		ougn	<i>i i</i>	(4) Pag	le	OI	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution	In-kind Description	Amendment	Amount	
Number	City, State, Zip Code	туре	Occupation	Туре	Description	Amendment	Amount	
f 1								
j į								
1 1								
1 1								
j j								
J I								
1 1								
1 1								

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Carlos	Gimene	Z				 (2) I.D. Nun	nber	1	L454	
		11/1/20	015		11/30/2	2015					
(3) Cover P	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
11/1/2015	Stripe, 3180 18th Street San Francisco, CA 94110	credit card fees	МО	Delete	\$2,238.99
11/1/2015	Stripe, 3180 18th Street San Francisco, CA 94110	credit card fees	МО	Add	\$2,228.66
11/17/2015	Photos by Carlos, 2520 NE 208th Terrace Miami, FL 33180	photography	МО	Delete	\$400.00
11/17/2015	Photos by Carlos, 2520 NE 208th Terrace Miami, FL 33180	photography	МО	Add	\$0.00
11/5/2015	MG Events, PO Box 13098 Miami, FL 33101	catering	МО	Add	\$2,121.81
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