	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Michelle Alvarez Barakat	OFFICE USE ONLY							
( · /	Name	ONLINE SUBMISSION							
(2)	2701 Ponce de Leon Blvd; Suite 202	[1184278]							
	Address (number and street)	Submitted on: 2/8/2019 11:51:03 (eastern)							
	Coral Gables, FL 33134	[2/6/2019 11:31:03 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:2045							
(4) Check appropriate box(es):									
	☐ Candidate Office Sought: County Court	Judge Group 20							
	Political Committee (PC)	7 cl - 1 l '' P0 - F00 l '' l 1 l							
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)	•							
	(5) Report	Identifiers							
Cove		8 / 2 / 2018 Report Type: 18TQJ							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casł	h & Checks \$ , , ,000	Monetary							
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , , 0 . 00	Total Monetary \$ , , 0 . 00							
In-Ki	ind \$ , , 0.00								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>126</u> , <u>254</u> . <u>00</u>	\$							
	(11) Cert It is a first degree misdemeanor for any pers	ification on to falsify a public record (ss. 839.13, F.S.)							
Ιc	certify that I have examined this report and it is true, corr	, , , ,							
		(Type name)							
	ype name)  Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		X							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	<u>Michelle Alvarez Ba</u>	rakat			2) I.D. Numbe	er2	2045
	5/1/2018		8	/2/2018			
(3) Cover Perio	od / /	thro	ugh	11	(4) Pag	e <sup>1</sup>	of <sup>0</sup>
			1007				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name				(Calaba)		
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ntributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
*			*	531/2	**		
1							
, ,							
*							
I I							
1 1							
1 1							
<i>T I</i>							
1 1							
1 1							
F 3							
1 1							
				-			
1 1							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name <u></u>	Michell	e Alva	rez B	Barakat			 (2) I.D. Nun	nber	2	2045	200
		5/1/20	18		8/2/203	18					
(3) Cover Pe	eriod	1	1	through	1	1	(4) Page	1	of	2	

(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
6/23/2018	Adimarket, 14750 NW 77 Ct Miami Lakes, FL 33016	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-355.27
6/23/2018	Ayala, Terrence P.O. Box 310970 Miami, FL 33231	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-355.27
6/23/2018	Aedo, Mario 11454 NW 83 Way Miami, FL 33178	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-177.63
6/23/2018	The Edelstein Firm, 1000 4th STreet Suite 300 Miami Beach, FL 33139	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-35.53
6/23/2018	Law Offices of James Pinkert , 1500 San Remo Ave, Suite 206 Coral Gables, FL 33146	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-35.53
6/23/2018	The Found Gen LLC, 95 Merrick Way 3rd Floor Coral Gables, FL 33134	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-35.53
6/23/2018	Dukes, William 2000 Ponce De Leon Blvd Coral Gables, FL 33134	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-35.53
6/23/2018	Pinkert, James 600 NE 27th Street, Suite 501 Miami, FL 33137	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-35.53

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _1	Michelle	e Alva	arez B	arakat			 (2) I.D. Nun	nber	2	2045	3
	5	/1/20	18		8/2/201	L8	-				
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	2	of	2	

(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	
6/23/2018	Law Offices of Abdel Jimenez , P.O. Box 249132 Coral Gables, FL 33124	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-35.53	
6/23/2018	Alejandro R. Alvarez P.A, 5344 SW 90 Ct Miami, FL 33165	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-26.65	
6/23/2018	Amtrust, 2701 Ponce De Leon Blvd Coral Gables, FL 33134	to void check as pro-rata refunds went unclaimed	DI	Delete	\$-17.76	
//						
//						
//						
//						