

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Joanne Carbana  
 Name  
 (2) PO BOX 172955  
 Address (number and street)  
Miami, FL 33017  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1169048]  
 Submitted on:  
 8/23/2018 08:09:04 (eastern)

Check here if address has changed

(3) ID Number: 2092

(4) Check appropriate box(es):

- Candidate Office Sought: Community Council Area/Subarea 05/51
- Political Committee (PC)
- Electioneering Communications Org. (ECO)  Check here if PC or ECO has disbanded
- Party Executive Committee (PTY)  Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if no other IE or EC reports will be filed

### (5) Report Identifiers

Cover Period: From 6 / 1 / 2018 To 9 / 17 / 2018 Report Type: 18TQC

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 150 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 150 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 150 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 150 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 150 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 150 . 00

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Joanne Carbana (2) I.D. Number 2092  
 (3) Cover Period 6/1/2018 through 9/17/2018 (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
6/1/2018 / /	Carbana, Joanne ***Protected***	I	paralegal	CH			\$150.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Joanne Carbana

(2) I.D. Number 2092

(3) Cover Period 6/1/2018 through 9/17/2018

(4) Page 1 of 1

(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					
6/4/2018 / /	Miami Dade County, 2700 NW 87 Avenue Miami, FL 33172	qualifying fee	MO		\$100.00
1					
7/12/2018 / /	Carbana, Joanne ***Protected***	reimburse loan	MO		\$50.00
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					