FLORIDA DEPARTMENT OF STATE, DIVISION OF ELECTIONS VED							
(1) MIMI DADE VETERANS FOR Candidate, Committee or Party Name  (2) 1/24/ NW 7 ST # 7  Address (number and street)  MAMI FL 3 3 / 7 Z  City, State, Zip Code  Check box if address has changed  (4) Check appropriate box(es):  Candidate (office sought):  Political Committee  Committee of Continuous Existence	OFFICE USE ONLY						
Party Executive Committee  (5) REPORT IDENTIFIERS							
Cover Period: From / / JAN 05 To 12 / JNL 10 5 Report Type  Original Amendment Special Election Report Independent Expenditure Report							
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$27,,	Monetary Expenditures \$ 25, , , ,						
Loans \$ 400°,,  Total Monetary \$ 400°,,	Transfers to Office Account \$ , , , .  Total Monetary \$ 25 <sup>32</sup> , , ,						
In-Kind \$ , ,	(8) Other Distributions \$ ,						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(11) CERTIFICATION							
	on 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.  STEVE SENTILE	I certify that I have examined this report and it is true, correct and complete.  STEVE SENTIGE						
Name of Treasurer Deputy Treasurer	Name of Candidate Chairman (PC/PTY Only)						
DS-DE 12 (Rev. 08/03)	Signature /						

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

(1) Name <u>STEVE SENIZIG</u> , <u>MIAMI DAVE</u> (2) I.D. Number <u>VETERANS PARTY</u> (3) Cover Period <u>II   JAW   05</u> through <u>IZ   APR   05</u> (4) Page <u>I</u> of <u>I</u>										
(3) Cover Period // / \(\overline{IM}\)   05 through \(\overline{IZ}\)   \(\overline{APR}\)   05 (4) Page \(\overline{I}\) of \(\overline{IZ}\)										
(5)  Date (6)  Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	(8) potributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12)			
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DS-DE 13 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES
(1) Name <u>STEVE SENZIG, MIAMI BADE JETEMAR</u>ILD. Number \_\_\_\_\_ (3) Cover Period // 15AM 05 through 12 1911 05 (4) Page \_ (8) (9) (10) (11) (5) Date **Full Name Purpose** (Last, Suffix, First, Middle) (add office sought if (6) Expenditure Street Address & contribution to a Sequence Type City, State, Zip Code candidate) Amendment Amount Number REG VOTERS \$2532 COUNTY CHECK ELECTIONS BOARD 2700 NN 87AVE MIANI 33172 rry Fr O

DS-D	E 1	14 (	Rev.	90	3/03)