

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Alex Dominguez Campaign
 Name
521 SW 23 Road
 Address (number and street)
Miami, FL 33129
 City, State, Zip Code

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 OFFICE OF THE CITY CLERK
 CITY OF MIAMI, FL

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: City of miami Commissioner District 3
 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 06 / 01 / 15 To 06 / 30 / 15 Report Type: M6
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00
 Loans \$ _____ , _____ , 200 . 00
 Total Monetary \$ _____ , _____ , 200 . 00
 In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 17 . 00
 Transfers to Office Account \$ _____ , _____ , 0 . 00
 Total Monetary \$ _____ , _____ , 17 . 00

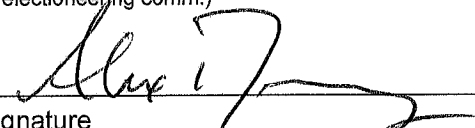
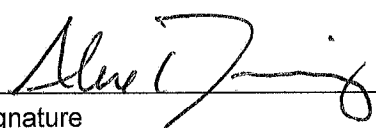
(8) Other Distributions
 \$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$ _____ , _____ , 2,000 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , _____ , 34 . 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) <u>Alex Dominguez</u> <input type="checkbox"/> Individual (only for IE or electioneering comm.) <input checked="" type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer	(Type name) <u>Alex Dominguez</u> <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC and PTY)
X <u></u> Signature	X <u></u> Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Alex Dominguez Campaign (2) I.D. Number _____

(3) Cover Period 06 / 01 / 15 through 06 / 30 / 15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
06 / 26 / 15 1	Dominguez, Alex 521 Sw 23 Road Miami, FL 33145	LOA	Pharnaceutic	CHE			\$200
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Alex Dominguez Campaign

(2) I.D. Number _____

(3) Cover Period 06 / 01 / 15 through 06 / 30 / 15

(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					
06 / 09 / 15 1	Citbank 1600 Coral Way Miami, Fl 33145	BANK FEES	MON		17

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CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Alex Dominguez Campaign (2) I.D. Number _____

(3) Cover Period 06 / 01 / 15 through 06 / 30 / 15 (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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
(6) Sequence Number						
/ /	Nothing to Report on this Form					
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CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name Alex Dominguez *Campaign*
 (3) Cover Period 06 / 01 / 15 through 06 / 30 / 15

(2) I.D. Number _____
 (4) Page 1 of 1

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
(6) Sequence Number					
/ /	NOTHING TO REPORT ON THIS FORM				
/ /					
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