

CAMPAIGN TREASURER'S REPORT SUMMARY

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

OFFICE USE ONLY

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Check here if address has changed

(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 12 / 01 / 15 To 12 / 31 / 15 Report Type: M12

Original Amendment Special Election Report

(6) Contributions This Report

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

(7) Expenditures This Report

Monetary Expenditures \$, , 182 . 60
 Transfers to Office Account \$, , . 0
 Total Monetary \$, , 182 . 60

(8) Other Distributions
 \$, , . 0

(9) TOTAL Monetary Contributions To Date
 \$, , 3 , 000 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, , 328 . 80

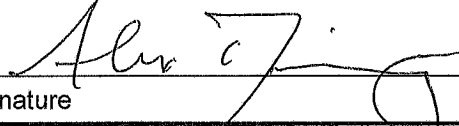
(11) Certification

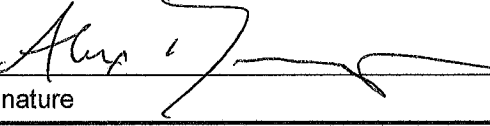
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Alex Dominguez
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

(Type name) Alex Dominguez
 Candidate Chairperson (only for PC and PTY)

X 
 Signature

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 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				
/ /	NOTHING TO REPORT ON THIS FORM						
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Alex Dominguez Campaign

(2) I.D. Number _____

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 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					
12 / 4 / 15 1	Miami Dade Elections Dept 2700 NW 87 Avenue Doral, Fl 33172	Voter info	MON		\$20
12 / 29 / 15 2	US POST OFFICE 3191 Grand avenue Cocounut Grove, Fl 33133	POSTAGE STAMPS	MON		\$145.60
12 / 9 / 15 3	CITIBANK 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 12 / 01 / 15 through 12 / 31 / 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						
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CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name Alex Dominguez Campaign

(2) I.D. Number _____

(3) Cover Period 12 / 01 / 15 through 12 / 31 / 15

(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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