CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Alex Dominator Campaign Name (2) 521 Ste 23 Road Address (number and street) Miami, Fl 33129 City, State, Zip Code	OFFICE USE ONLY OFFICE OF THE CITY CLERE OFFICE OF THE CITY CLERE					
☐ Check here if address has changed (4) Check appropriate box(es):	(3) ID Number:					
Candidate Office Sought: Committee (PC) Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed						
(5) Report	Identifiers					
Cover Period: From 4 / 1 / 10 To	<u> </u>					
Original Amendment Sp	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$, ,	Monetary Expenditures \$, ∫ 5 . O♡					
Loans \$,,	Transfers to Office Account \$, ,					
In-Kind \$, , ,	Total Monetary \$, / <u>5</u> . <u>OO</u>					
, , , , <u> </u>	(8) Other Distributions \$, ,					
(9) TOTAL Monetary Contributions To Date \$,	(10) TOTAL Monetary Expenditures To Date \$, _37 <u>{0}</u> \\					
(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, cor	rect, and complete:					
(Type name) Alox Dominguez ☐ Individual (only for IE or electioneering comm.) ☐ Treasurer ☐ Deputy Treasurer	(Type name) Alex Swinguez (Candidate ☐ Chairperson (only for PC and PTY)					
X Lup 7	X Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Alex Dominguez				(2) I.D. Number				
(3) Cover Period	<u>~ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</u>	through	4/	30 / 17	_ (4) Page	_1_0	of 1	
(5) Date	(7) Full Name	8)	3)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contri	ibutor ccupation	Contribution Type	In-kind Description	Amendment	Amount	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

1) Name Alex Downwaz Gw para (2) I.D. Number							
(3) Cover Period	d <u> </u>	30/17 (4	l) Page	of	1		
(5) Date (6) Sequence Number	(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)	(11)		
4/15/17	Citibank 1600 Coral Way Moami, Fl 33145	Bank Fess	Мон		# 15		
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/ /				2/E C17 C15P	PECENE		

CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS ampalan (2) I.D. Number_ / \7_through (3) Cover Period _ _/ 130/17 (4) Page (10) (11) (7) (8) (9) (5) Date Name of Financial Institution (6) Street Address & Transfer Nature of Sequence City, State, Zip Code Туре Account Amount Number Amendment Mothing to this form 5 1

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS \uparrow

(1) Name Alex Dowinguez Campagn (2) I.D. Number						
(3) Cove	er Period 4 / / /	<u>げ</u> through <u>ー</u>	130 117	_ (4) Page	• <u> </u>	of
(5) Date (6) Sequence Number	(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
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