CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	James Torres	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	500 NW 2nd Ave #10245	Submitted on:								
	Address (number and street)	4/29/2023 13:12:56 (eastern)								
	Miami, FL 33101 City, State, Zip Code	—— I								
	☐ Check here if address has changed	(3) ID Number: 86								
(4)	_	(3) ID Number:86								
(4)	Check appropriate box(es):  Candidate Office Sought: Commissioner	District 2								
	Political Committee (PC)	DISCIPLE 2								
	☐ 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										
Cove	er Period: From $\underline{1}$ / $\underline{27}$ / $\underline{2023}$ To	2 / 9 / 2023 Report Type: S02								
☐ Original ☐ Amendment ☐ Special Election Report										
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ , , ,000	Monetary								
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , 0 . 00								
Tota	I Monetary \$ , , 0 . 00	Total Monetary \$ , , 200 . 00								
In-Ki	ind \$,,, <u>0</u> . <u>00</u>									
		(8) Other Distributions								
		\$ , , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>54</u> , <u>815</u> . <u>00</u>	\$ , <u>53</u> , <u>165</u> . <u>14</u>								
	X /	rtification son 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:										
	ype name)  Individual (only for IE	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)								
	electioneering comm.)	G Granpoison (only for to and titt)								
X		x								
Si	gnature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	James Torres				2) I.D. Numbe	er <u>8</u>	36
	1/27/2023		2	/9/2023			
(3) Cover Perio	od / /	thro	ugh	1 1	(4) Pag	e <sup>1</sup>	of <sup>0</sup>
	7				, , ,	N N	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(0)	(0)	(10)	X : 13	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ntributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
11001	ony, care, z.p code	1,7,00	Googpadon	.,,,,,,	Description		3 11104110
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name James	Torres					(2) I.D. Nui	mber		36	
	1/27/2	023		2/9/202	3					
(3) Cover Period	I	1	through	1	1	(4) Page	1	of	1	

Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code  Miami Dade County- Elections, 2700 NW 87th Avenue Miami, FL 33172	Purpose (add office sought if contribution to a candidate)  city of miami -d2 maps and	Expenditure Type	Amendment	Amount
2/1/2023	2700 NW 87th Avenue	city of miami -d2 maps and	MO	† <u> </u>	
	MIAMI, FL 331/2	data		Add	\$200.00
1	Miami, FL 33172				
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