

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Alberto H. Chavez  
 Name

(2) 11356 NW 57 Terrace  
 Address (number and street)

Doral, FL 33178  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1204245]

Submitted on:  
 4/9/2020 21:23:45 (eastern)

Check here if address has changed

(3) ID Number: 42

(4) Check appropriate box(es):

- Candidate Office Sought: Council Seat 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 3 / 1 / 2020 To 3 / 31 / 2020 Report Type: M03

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 600 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 600 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 0 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 0 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 5 , 020 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      , 1 , 514 . 59

### (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) \_\_\_\_\_

Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

**X** \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_

Candidate  Chairperson (only for PC and PTY)

**X** \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Alberto H. Chavez (2) I.D. Number 42  
 (3) Cover Period 3/1/2020 through 3/31/2020 (4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor |            | (9)<br>Contribution | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|---------------------------|--|--------------------|------------|---------------------|--------------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  | Type               | Occupation | Type                |                                |                   |                |
| 3/16/2020<br>/ /          | Bendell Insurance<br>Group,<br>PO BOX 164235<br>Miami, FL 33116                                | B                  | insurance  | CH                  |                                |                   | \$500.00       |
| 1                         |  |                    |            |                     |                                |                   |                |
| 3/16/2020<br>/ /          | Dr. Jose Tendaro<br>PA,<br>8013 NW 163 Terrace<br>Miami Lakes, FL 33012                        | B                  | doctor     | CH                  |                                |                   | \$100.00       |
| 2                         |  |                    |            |                     |                                |                   |                |
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Alberto H. Chavez

(2) I.D. Number 42

(3) Cover Period 3/1/2020 through 3/31/2020

(4) Page 1 of 0

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |  |  |                            |                   |                |
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