	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Carlos O. Alvarez	OFFICE USE ONLY						
The so	Name	ONLINE SUBMISSION						
(2)	8394 NW 144 Street	Submitted on:						
	Address (number and street)	2/12/2018 22:28:06 (eastern)						
	Miami Lakes, FL 33016  City, State, Zip Code	<del></del>						
	☐ Check here if address has changed	(3) ID Number: 34						
(4)	Check appropriate box(es):	(6)						
()	☐ Candidate Office Sought: Council Seat	6						
	☐ Political Committee (PC)							
	_	☐ Check here if PC or ECO has disbanded						
		<ul><li>☐ Check here if PTY has disbanded</li><li>☐ Check here if no other IE or EC reports will be filed</li></ul>						
	individual making electioneering communications)							
	(5) Panari	1						
000	* , *	Identifiers						
	er Period: From $\frac{1}{2}$ / $\frac{1}{2018}$ To							
<u>X</u> 0	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	h & Checks \$ , , 0 . <u>00</u>	Expenditures \$ , , <u>371</u> . <u>00</u>						
Loar	ns \$,,,000	Transfers to						
LUai	ıs	Office Account \$ , , 0 . 00						
Tota	al Monetary \$ , , 0 . 00	, , , , , , , ,						
		Total Monetary \$ , , 371 . 00						
In-Ki	ind \$,,,_0.00							
		(8) Other Distributions						
	1	\$,,,000						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(0)	\$,8_, _52500	\$ , 3 , 357 00_						
	·,,	, <u> </u>						
	(11) Cert							
	It is a first degree misdemeanor for any personal							
I certify that I have examined this report and it is true, correct, and complete:								
_(T	ype name)	(Type name)						
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х	,	X						
Si	ignature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number 34								
	1/1/2018 od / /		1	/31/2018 //	(4) Pag	e <u>1</u>	of	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8)  Contributor  Type Occupation		(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount	
/ /	Oity, Otate, 219 Oode	Турс	Cecupation	Турс	Description		Amount	
J I								
1 1								
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J 1								
1 1								
J I								

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _	Carlos	0.	Alva	arez				 (2) I.D. Nur	nber	3	34	
		1/1	/201	8		1/31/2	2018		-			
(3) Cover P	eriod		/	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
1/16/2018	THE UPS STORE, 8004 NW 154 Street Miami Lakes, FL 33016	roll of stamps	МО		\$53.00
1 1/23/2018 2	THE UPS STORE , 8004 NW 154 STREET Miami Lakes, FL 33016	6 rolls of stamps for birthday card and thank you cards	МО		\$318.00
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