CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Andriana C. Riera	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	101 SW Meade Circle	Submitted on:							
	Address (number and street)	11/25/2018 03:33:48 (eastern)							
	Port St. Lucie, FL 34953 City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 368							
(4)	_	(b) 15 Number.							
(-)	A) Check appropriate box(es): Candidate								
	(5) Report	Identifiers							
Cove	er Period: From <u>8</u> / <u>24</u> / <u>2018</u> To								
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casł	n & Checks \$, , ,000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , 0 . 00	Total Monetary \$, , 643 . 89							
In-Ki	nd \$,, <u>0</u> .00								
		(8) Other Distributions \$, , 000							
(9)	(9) TOTAL Monetary Contributions To Date \$,2_,39797_								
(T)	(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								
X Si	gnature	X Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Andriana C. Riera	(2) I.D. Number									
	8/24/2018		1	1/26/2018		1	0				
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e <u> </u>	of				
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)				
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupatio		Contribution Type	In-kind Description	Amendment	Amount				
Number	City, State, Zip Code	Type	Occupation	туре	Description	7 11101111111111	Amount				
<i>f</i> 1											
1 1											
1 1											
f f											
I I											
J I											
J I											
J I											

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Andriana C	. R	iera					 (2) I.D. Nui	nber	3	368	
	8/24	4/20	18		11/2	6/20	018					
(3) Cover P	eriod /	P21	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
10/25/2018	FACEBOOK AD, 156 UNIVERSITY AVE PALO ALTO, CA 94301	adv ccommited before rimary	МО		\$12.08
1					
11/25/2018	Riera, Andriana Christine 101 SW Meade Cir Port St. Lucie, FL 34953	repayment reimbursement	RM		\$631.81
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//					
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//					
DS-DE 14 (Rev.	4440 \				75.01