

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

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PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

(1) Waldo Faura Jr.
Name

(2) 1790 NW 22ND Street
Address (number and street)

Miami, FL 33142
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 0000

(4) Check appropriate box(es):

Candidate (office sought): City of Miami Commissioner District 1

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous Existence CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 11 / 30 / 09 To 12 / 04 / 09 Report Type Q1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1,000.00

Loans \$ 19,500.00

Total Monetary \$ 20,500.00

In-Kind \$

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1,151.15

Transfers to Office Account \$

Total Monetary \$ 1,151.15

(8) Other Distributions

\$

(9) TOTAL Monetary Contributions To Date

\$ 20,500.00

(10) TOTAL Monetary Expenditures To Date

\$ 1,151.15

(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.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Maria Belen Valladares

(Type name) Waldo Faura Jr.

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X *Maria Belen Valladares*
Signature

X *Waldo Faura Jr.*
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Campaign for Waldo Faura (2) I.D. Number 0000

(3) Cover Period 11 / 30 / 09 through 12 / 04 / 09 (4) Page 1 of 1

(5) Date	(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) Amendment	(11) Amount
(6) Sequence Number					
11 / 30 / 09	Board of County Commission 2700 NW 87TH Avenue Miami, FL 33172	Public Service Counter Lists Order	MON		\$100.00
001					
11 / 30 / 09	Metro PCS Store 7640 NW 25th Street Miami, FL 33122	Phones	MON		\$369.15
002					
12 / 04 / 09	City of Miami Office of the City Clerk 3500 Pan American Drive Miami, FL 33133	Qualifying Fee	MON		\$682.00
003					
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Campaign for Waldo Faura (2) I.D. Number 00000

(3) Cover Period 11 / 30 / 09 through 12 / 04 / 09 (4) Page 1 of 1

(5) Date	(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) Amendment	(12) Amount
11 / 30 / 09	Waldo Faura Sr.	I	Retiree	CHE			500.00
001							
11 / 30 / 09	Waldo Faura III	I	Public Adjus- ter	CHE			500.00
002							
12 / 02 / 09	Waldo Faura Jr.	I	Candi- date	LOA			19,500.00
003							
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CAMPAIGN LOANS REPORT ITEMIZED

Page 1 of 1

(PLEASE TYPE)

<p>FULL NAME AND ADDRESS OF LENDER: Waldo Faura Jr. _____ 1790 NW 22 Street _____ Miami, FL 33142 _____ OCCUPATION: <u>Candidate</u> AMOUNT OF LOAN: <u>\$19,500.00</u> DATE RECEIVED: <u>12/2/2009</u></p>	<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____ _____ OCCUPATION: _____ AMOUNT OF LOAN: _____ DATE RECEIVED: _____</p>
<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____ _____ OCCUPATION: _____ AMOUNT OF LOAN: _____ DATE RECEIVED: _____</p>	<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____ _____ OCCUPATION: _____ AMOUNT OF LOAN: _____ DATE RECEIVED: _____</p>
<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____ _____ OCCUPATION: _____ AMOUNT OF LOAN: _____ DATE RECEIVED: _____</p>	<p>FULL NAME AND ADDRESS OF LENDER: _____ _____ _____ _____ OCCUPATION: _____ AMOUNT OF LOAN: _____ DATE RECEIVED: _____</p>

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CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name Campaign for Waldo Faura

(2) I.D. Number 0000

(3) Cover Period 11 / 30 / 09 through 12 / 04 / 09

(4) Page 1 of 1

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
(6) Sequence Number					
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CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Campaign for Waldo Faura (2) I.D. Number 0000

(3) Cover Period 11 / 30 / 2009 through 12 / 04 / 2009 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if contribution to a candidate)	(9) Related Expenditures	(10) Amendment	(11) Amount
(6) Sequence Number	Street Address & City, State, Zip Code				
/ /	Nothing to report on this form				
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