

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

(1) LOUIS CARAVELLA
Name
 (2) 2700 SUNRISE LAKES DR. W
Address (number and street)
SUNRISE FL 33322
City, State, Zip Code

OFFICE USE ONLY

09 APR 10 AM 11:37
 CITY CLERK
 CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED (3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): CITY COMMISSIONER GROUP "D"
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
 Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 01/01/09 To 04/10/09 Report Type (1)
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 520.00
 Loans \$ _____
 Total Monetary \$ _____
 In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 94.46
 Transfers to Office Account \$ _____
 Total Monetary \$ _____

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 5840.00

(10) TOTAL Monetary Expenditures To Date
 \$ 111.01

(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) DIANA ZAMBENARDI
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Diana Zambenardi
 Signature

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

(Type name) LOUIS CARAVELLA
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

Louis Caravella
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name LOUIS CARAVELLA

(2) I.D. Number _____

(3) Cover Period 01/01/09 through 4/10/09

(4) Page 1 of _____

(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
1/22/09 1	D. ZAMBERNARDI 2901 SUNRISE LKS DR E SUNRISE FL 33322		Mon		9.46
1/27/09 2	SAL GAEGG 2750 SUNRISE LKS DR W SUNRISE FL 33322		REF		10.00
1/27/09 3	MAX EISENBERG 7960 SUNRISE LKS DR N SUNRISE FL 33322		REF		50.00
1/27/09	TONI SCHNARR 7960 SUNRISE LKS DR N SUNRISE FL 33322		REF		25.00
1/1					
1/1					
1/1					
1/1					

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name LOUIS CARAVELLA (2) I.D. Number _____

(3) Cover Period 01/10/109 through 4/10/109 (4) Page 1 of _____

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Type	Occupation	Type	Description		
1 114 109 1	SERVPRO OF SUNRISE SUNRISE, FL 33322	B		CHK			200.00
1 121 109 2	DON L. CANGELOSI 333 W. 15 ST SHIP BOTTOM, NJ 07008	I	RET	CHK			100.00
2 19 109 3	GARY/MARTHA OSBORNE 8040 SUNRISE LKS DR. N. SUNRISE FL 33372	I	RET	CHK			20.00
4 101 109 4	S. JAMES ELLISON 4974 S.W. 78 ST MIAMI FL 33143	I	RET	CHK.			100.00
2 105 109	LOUIS CARAVELLA 2700 SUNRISE LKS DR W SUNRISE FL 33322	I	RET	CHK			100.00
1 1							
1 1							
1 1							

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