

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

CITY CLERK
CITY OF SUNRISE
OFFICE USE ONLY
09 OCT -7 AM 9:18

(1) LOUIS CARAVELLA

Name

(2) 2700 SUNRISE LAKES DR. W

Address (number and street)

SUNRISE FL 33322

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): CITY COMMISSIONER

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 7/1/09 To 9/30/09 Report Type Q3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 10.00

Loans \$ _____

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date

\$ 5850.00

(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 ZAMBERNARDI

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Diana Zambernardi
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)

X Louis Caravella
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name LOUIS CARAVELLA

(2) I.D. Number _____

(3) Cover Period 7 1 0 1 1 0 9 through 9 1 3 0 1 0 9

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)
(6) Sequence Number	Street Address & City, State, Zip Code	Contributor Type	Occupation	Contribution Type	In-kind Description	Amendment	Amount
7107109	LOU CARAVELLA 2700 SUNRISE LK. S.W. SUNRISE FL 33022	I	R	CAS			10.00
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