

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

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

OFFICE USE ONLY
10 SEP 17 PM 1:46
CITY CLERK
CITY OF SUNRISE

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): Comm. "C"
 Political Committee
 Committee of Continuous Existence
 Party Executive Committee
 Electioneering Communication

CHECK IF PC HAS DISBANDED
 CHECK IF CCE HAS DISBANDED
 CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 07/01/10 To 09/10/10 Report Type G1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1990.00
Loans \$ 100.00
Total Monetary \$ 2090.00
In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 3479.86
Transfers to Office Account \$ _____
Total Monetary \$ 3479.86

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 11,190.00

(10) TOTAL Monetary Expenditures To Date

\$ 3955.97

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

X Lou Caravella
Signature

Diana Zambernardi

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Lou Caravella (2) I.D. Number _____

(3) Cover Period 7 1 1 10 through 9 1 10 10 (4) Page _____ of _____

(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
(6) Sequence Number		Type	Occupation	Type	Description		Amount
7 1 14 10 1	R+S CALAMIOS 10334 BOCA SPRINGS DR. BOCA RATON, FL 33428	I	RET	CK			250.00
7 1 21 10 2	MR & MRS R DOMINGUEZ 2475 SWANSON AVE MIAMI FL 33133	I	Sls Rep	CK.			200.00
7 1 21 10 3	UCI PAINTS 1320 N.W. 23 AVE FT. LAUDERDALE. FL. 33311	B	PAINTING	CK.			500.00
8 1 5 10 4	S. JAMES ELLISON 4974 S.W. 76 ST MIAMI FL 33143	I	RET	CK.			200.00
8 1 5 10 5	ARMANDO FERNANDEZ 1115 S.W. 17 CT MIAMI FL 33184	I	Supervisor	CK.			200.00
8 1 5 10 6	LOU CARAVELLA 2700 SUNRISE LAKES DR. W. SUNRISE FL 33322	I	RET	LOA			50.00
8 1 14 10 7	CIA 100 NE 3 AVE FT. LAUDERDALE FL 33301	B	INS.	CK			500.00
8 1 14 10 8	SPF 3210 SE 10 ST POMPANO BEACH, FL	B	Roofing	C			100.00

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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

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

(3) Cover Period 7 1 1 1 0 through 9 1 1 0 1 1 0 (4) Page _____ of _____

(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
(6) Sequence Number		Type	Occupation	Type	Description		Amount
8 1 2 8 1 1 0	Josephine VALENTI 8081 SUNRISE LAKES DR. W SUNRISE FL 33322	I	RET	CK			40.00
9							
8 1 2 8 1 1 0	LOU CARAVELLA 2700 SUNRISE LAKES DR W. SUNRISE FL 33322	I	RET	COA			50.00
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Leu CARAVELLA

(2) I.D. Number _____

(3) Cover Period 7/1/10 through 9/10/10

(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
7/14/10	MOVIN ON TEES 3161 OAKLAND PARK BLVD. OAKLAND PARK FL 33311	CAMPAIGN SHIRTS	MON		450.00
1					
7/19/10	WHOLESALE PRINTERS	PRINT MATERIAL FOR CAMP.	MON		212.00
2					
8/3/10	LION PRESS 1913 W. COPANS RD POMPANO BEACH FL 33064	CAMPAIGN FLYERS	MON		87.62
3					
8/16/10	SIGNS NOW 2752 N. UNIVERSITY DR SUNRISE FL 33222	Campaign Sign	MON		18.00
4					
1/1	CITY OF SUNRISE 10770 W. OAKLAND AVE. SUNRISE, FL 33351	Qual. App	MON		2718.24
1/1					
1/1					
1/1					

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