

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

CITY CLERK
 CITY OF SUNRISE
 08 JUL - 8 PM 2:00

(1) Eduardo Garay
 Name
 (2) 9021 SUNRISE LAKES BLVD.
 Address (number and street)
SUNRISE FL. 33322
 City, State, Zip Code

OFFICE USE ONLY
 (3) ID Number: _____

CHECK IF ADDRESS HAS CHANGED

(4) Check appropriate box(es):
 Candidate (office sought): CITY COMMISSIONER (SUNRISE)
 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 July 1st 08 To 06/30/08 Report Type Q2
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 500.00
 Loans \$ _____
 Total Monetary \$ 500.00
 In-Kind \$ 260.71

(7) EXPENDITURES THIS REPORT

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

(8) Other Distributions \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 760.71

(10) TOTAL Monetary Expenditures To Date
 \$ _____

(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) Irene Garay
 Individual only for electioneering commun Treasurer Deputy Treasurer

X [Signature]
 Signature

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

(Type name) Eduardo Garay
 Candidate Chairperson (only for PC, PTY & electioneering comm. in organization)

X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name EDUARDO GARAY (2) I.D. Number _____

(3) Cover Period 04/01/2008 through 07/08/2008 (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
04/11/08	Garay, Susan 9021 Sunrise Lakes Blvd. Sunrise, FL 33322	Legal Aid	CHK			100.00
04/12/08	Garay, Eduardo 12647 SW 28 Court Miramar, FL 33027	Civil Engineer	CHK			100.00
04/06/2008	Garay, Leslie A. 10105 W. Sunrise Blvd Apt. 104 Plantation, FL 33322	International Business Admin.	CHK			100.00
04/17/08	Morgan, Irene & Clifford 25445. Cass Ave. Tucson, AZ 85708	Insurance agent	CHK			100.00
05/01/2008	Halpern, Jerry N. 9435 CHELSEA DR. N. Plantation, FL. 33324	Retired	CHK			100.00
5/18/08	Eduardo Garay	Retired	INR			260.71
/ /						
/ /						

CITY CLERK
 CITY OF SUNRISE
 08 JUL -8 PM 1:59

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

(1) Eduardo Garay
Name

(2) 9021 Sunrise Lakes Blvd
Address (number and street)

Sunrise, FL 33322
City, State, Zip Code

OFFICE USE ONLY

CITY CLERK
CITY OF SUNRISE

08 OCT 10 PM 3:08

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): City Commissioner - Sunrise

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 07 / 01 / 08 To 09 / 30 / 08 Report Type Q3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ —

Loans \$ —

Total Monetary \$ —

In-Kind \$ —

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 284.21

Transfers to Office Account \$ _____

Total Monetary \$ 284.21

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 760.71

(10) TOTAL Monetary Expenditures To Date

\$ 284.21

(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) Irene Garay

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Irene Garay
Signature

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

(Type name) Eduardo Garay

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

Eduardo Garay
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Eduardo Garay

(2) I.D. Number _____

(3) Cover Period 07 / 01 / 08 through 09 / 30 / 08

(4) Page _____ 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
08/21/08 00001	Office Depot 3426 North Univ Drive Sunrise, FL 33351	Office Supplies	Mon		11869
10/01/08 00002	B.J.'s Wholesale 3469 North Univ Drive Sunrise, FL 33351	Office Supplies	Mon		6552
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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Eduardo Garay (2) I.D. Number _____

(3) Cover Period 07/01/08 through 09/30/08 (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
/ /		<i>None</i>					
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							