



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**JOE MARTINEZ FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	55080.00	55080.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	55080.00	55080.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	11265.16	11265.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11265.16	11265.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	49670.81	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**JOE MARTINEZ FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	54525.00	54525.00
(ii) Unitemized.....	555.00	555.00
(iii) TOTAL of contributions from individuals ▶	55080.00	55080.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	55080.00	55080.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	55080.00	55080.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11265.16	11265.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	11265.16	11265.16

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5855.97
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	55080.00
25. SUBTOTAL (add Line 23 and Line 24).....	60935.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11265.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	49670.81

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alexis M. Agreda**

Mailing Address 7225 SW 76 Street

City Miami State FL Zip Code 33143

FEC ID number of contributing federal political committee. **C**

Name of Employer Agreda & Co., C.P.A. Occupation Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 17 / 2014

**Transaction ID : SA11AI.4103**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Albelo**

Mailing Address 2550 S. Bayshore Drive

City Miami State FL Zip Code 33133

FEC ID number of contributing federal political committee. **C**

Name of Employer Ocean Promotions Occupation marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4150**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Esther L. Alvarez**

Mailing Address 4834 NW 94th Doral Place

City Miami State FL Zip Code 33178

FEC ID number of contributing federal political committee. **C**

Name of Employer homemaker Occupation homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4188**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 19			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Manuel Alvarez**

Mailing Address 6890 SW 89th Court

City Miami State FL Zip Code 33173

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation store owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 30 / 2014

**Transaction ID : SA11AI.4208**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Maximo Alvarez**

Mailing Address 1650 NW 87th Avenue

City Miami State FL Zip Code 33172

FEC ID number of contributing federal political committee. **C**

Name of Employer Sunshine Distributors Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : SA11AI.4152**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Daniel E. Benarroch**

Mailing Address 3610 Yacht Club Drive Apt. 1513

City Aventura State FL Zip Code 33180

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation restaurateur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : SA11AI.4174**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Darion Brunet**

Mailing Address 2655 SW 92nd Avenue

City Miami State FL Zip Code 33165

FEC ID number of contributing federal political committee. **C**

Name of Employer Wells Fargo Occupation banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4160**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Alvaro E. Castillo**

Mailing Address 11032 NW 84th Street

City Doral State FL Zip Code 33178

FEC ID number of contributing federal political committee. **C**

Name of Employer AC Export Occupation business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4198**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Erika C. Castillo**

Mailing Address 11048 NW 72nd Terr

City Doral State FL Zip Code 33178

FEC ID number of contributing federal political committee. **C**

Name of Employer Digital Money Occupation administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4184**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Daisy Espinosa**

Mailing Address 330 NW 114th Avenue  
Apt. 105

City Miami State FL Zip Code 33172

FEC ID number of contributing federal political committee. **C**

Name of Employer food wholesale distribution co Occupation comptroller

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 30 / 2014

**Transaction ID : SA11AI.4212**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Augusto J. Espinosa Zamora**

Mailing Address 330 NW 114th Avenue  
#7-105

City Miami State FL Zip Code 33172

FEC ID number of contributing federal political committee. **C**

Name of Employer food wholesale distribution co Occupation executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 30 / 2014

**Transaction ID : SA11AI.4210**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Maria Eugenia Govea Fernandez**

Mailing Address 41 SE 5th Street  
South Tower, Apt. 1712

City Miami State FL Zip Code 33131

FEC ID number of contributing federal political committee. **C**

Name of Employer homemaker Occupation homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : SA11AI.4176**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jorge L. Figueroa**

Mailing Address 1805 Se Van Loon Terr

City State Zip Code  
Cape Coral FL 33990

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4166**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**AnaMaria Garcia**

Mailing Address 2101 NW 110th Avenue

City State Zip Code  
Miami FL 33172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
homemaker homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4192**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Luis Garcia**

Mailing Address 2101 NW 110th Avenue

City State Zip Code  
Miami FL 33172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Adonel Concrete CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4190**

Amount of Each Receipt this Period  
 2600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Porfirio Garcia**

Mailing Address 13675 SW 78th Street

City Miami State FL Zip Code 33183

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation mechanic

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4204**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Samuel L. Gilmore**

Mailing Address P.O. Box 420557

City Miami State FL Zip Code 33242

FEC ID number of contributing federal political committee. **C**

Name of Employer Overnight Success Inc. Occupation General Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4122**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Ray Granja**

Mailing Address 2270 NW 23rd Street

City Miami State FL Zip Code 33142

FEC ID number of contributing federal political committee. **C**

Name of Employer Rex Chemical Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 13 / 2014

**Transaction ID : SA11AI.4110**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Luis A. Lima**

Mailing Address 90 NW 24th Avenue

City Miami State FL Zip Code 33125

FEC ID number of contributing federal political committee. **C**

Name of Employer Healing Touch Home Health Occupation business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Martha O. Lima**

Mailing Address P.O. Box 451250

City Miami State FL Zip Code 33245

FEC ID number of contributing federal political committee. **C**

Name of Employer Continuous Home Care Services Occupation doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4162**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Jorge L. Lopez**

Mailing Address 1889 S. Bayshore Drive

City Coconut Grove State FL Zip Code 33133

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4158**

Amount of Each Receipt this Period  
 2600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 19

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Amelia Quintana Mesa**

Mailing Address 13133 NW 6th Terr

City Miami State FL Zip Code 33182

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4156**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Steven Miro**

Mailing Address 4506 SW 132 Place

City Miami State FL Zip Code 33175

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation investigator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4116**

Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven Miro**

Mailing Address 4506 SW 132 Place

City Miami State FL Zip Code 33175

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation investigator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4121**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

575.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alexander D. Morales**

Mailing Address 11304 NW 66 Street

City State Zip Code  
Doral FL 33178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
1st United Funding loan officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : SA11AI.4180**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ofelia G. Napole**

Mailing Address 4035 SW 98th Avenue

City State Zip Code  
Miami FL 33165

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
homemaker homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4200**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Alexander E. Napoles**

Mailing Address 4035 SW 98th Avenue

City State Zip Code  
Miami FL 33165

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AI-Flex business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4202**

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jorge Negrin**

Mailing Address 539 SW 136th Place

City Miami State FL Zip Code 33184

FEC ID number of contributing federal political committee. **C**

Name of Employer Convex Corp Occupation project manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : SA11AI.4182**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Yadyleidi Pedrosa**

Mailing Address 10076 SW 144th Avenue

City Miami State FL Zip Code 33186

FEC ID number of contributing federal political committee. **C**

Name of Employer Quality Control Services Occupation administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4194**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Sergio Pino**

Mailing Address 398 Isla Dorada Blvd

City Coral Gables State FL Zip Code 33143

FEC ID number of contributing federal political committee. **C**

Name of Employer Century Homebuilders Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : SA11AI.4170**

Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6100.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 19  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Tatiana Pino**

Mailing Address 398 Isla Dorada Blvd

City State Zip Code  
Coral Gables FL 33143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
homemaker homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : SA11AI.4172**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ann Marie Reyes**

Mailing Address 27245 SW 166th Avenue

City State Zip Code  
Homestead FL 33031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self-employed production

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4168**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Anthony Rodriguez**

Mailing Address 6323 SW 138 Path

City State Zip Code  
Miami FL 33183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self-employed property manager

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 17 / 2014

**Transaction ID : SA11AI.4214**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Augusto V. Rodriguez**

Mailing Address 14941 SW 82 Terr.  
Apt. 204

City Miami State FL Zip Code 33193

FEC ID number of contributing federal political committee. **C**

Name of Employer medical clinic Occupation manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4196**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Orlando P. Sanchez**

Mailing Address 9682 Fontainebleau Blvd  
Apt. 501

City Miami State FL Zip Code 33172

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11AI.4206**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Pascual F. Tomasetti**

Mailing Address 5490 NW 113th Ct

City Doral State FL Zip Code 33178

FEC ID number of contributing federal political committee. **C**

Name of Employer A Touch of Class Occupation manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 19 / 2014

**Transaction ID : SA11AI.4178**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rogelio Tovar</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address P.O. Box 143975		<b>Transaction ID : SA11AI.4148</b>
City Coral Gables	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Palmetto 57	Occupation CEO - auto group	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Nelson Vazquez</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 3022 SW 151 Ct		<b>Transaction ID : SA11AI.4186</b>
City Miami	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Extra Supermarket	Occupation General Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Ivette Zaldivar</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 741 NW 126th Court		<b>Transaction ID : SA11AI.4164</b>
City Miami	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self-employed	Occupation bookkeeper	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	54525.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 19			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dark Horse Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 3663 SW 8th Street, Ste. 205		Amount of Each Disbursement this Period 2750.00 <b>Transaction ID : SB17.4133</b>
City Miami State FL Zip Code 33135	Purpose of Disbursement consulting 003 Category/Type	
Candidate Name <b>JOE A MARTINEZ</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) <b>B. Dark Horse Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 3663 SW 8th Street, Ste. 205		Amount of Each Disbursement this Period 1465.00 <b>Transaction ID : SB17.4137</b>
City Miami State FL Zip Code 33135	Purpose of Disbursement printing 006 Category/Type	
Candidate Name <b>JOE A MARTINEZ</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) <b>c. Dark Horse Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 3663 SW 8th Street, Ste. 205		Amount of Each Disbursement this Period 2860.00 <b>Transaction ID : SB17.4138</b>
City Miami State FL Zip Code 33135	Purpose of Disbursement consulting / voter data 003 Category/Type	
Candidate Name <b>JOE A MARTINEZ</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7075.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**JOE MARTINEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Dark Horse Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 3663 SW 8th Street, Ste. 205		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : SB17.4139</b>
City Miami State FL Zip Code 33135	Purpose of Disbursement consulting 003 Category/Type	
Candidate Name <b>JOE A MARTINEZ</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) <b>B. Republican Party of Miami Dade</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 1460 NW 107 Avenue		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.4142</b>
City Doral State FL Zip Code 33172	Purpose of Disbursement donation 011 Category/Type	
Candidate Name <b>JOE A MARTINEZ</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

Full Name (Last, First, Middle Initial) <b>c. Web Elect.net LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 1256 Vinetree Drive		Amount of Each Disbursement this Period 1010.00 <b>Transaction ID : SB17.4140</b>
City Brandon State FL Zip Code 33510	Purpose of Disbursement marketing 004 Category/Type	
Candidate Name <b>JOE A MARTINEZ</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 26		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4010.00
<b>TOTAL</b> This Period (last page this line number only).....	11085.00