FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
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Office Use Only

12FE4M5

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines.

JOE MARTINEZ FOR CONGRESS

ADDRESS (number and street) ▼

2121 Ponce de Leon Blvd, #1100

Check if different than previously reported. (ACC)

CITY ▲ Coral Gables | STATE ▲ FL | ZIP CODE ▲ 33134 -

2. **FEC IDENTIFICATION NUMBER** ▼

C 00550764

3. IS THIS REPORT [X] NEW (N) **OR** [ ] AMENDED (A)

STATE ▼ DISTRICT: FL 26

14031171644

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- [ ] April 15 Quarterly Report (Q1)
- [ ] July 15 Quarterly Report (Q2)
- [ ] October 15 Quarterly Report (Q3)
- [X] January 31 Year-End Report (YE)
- [ ] Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- [X] Primary (12P)
- [ ] General (12G)
- [ ] Runoff (12R)
- [ ] Convention (12C)
- [ ] Special (12S)

Election on 11 / 04 / 2014 in the State of FL

(c) 30-Day **POST**-Election Report for the:

- [ ] General (30G)
- [ ] Runoff (30R)
- [ ] Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 10 / 01 / 2013 through 12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SUSANA TACORONTE

Signature of Treasurer Susana Tacoronte Date 01 / 30 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							

FEC FORM 3
(Revised 02/2003)

FE5AN018

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
JOE MARTINEZ FOR CONGRESS

Report Covering the Period: From: 10 / 01 / 2013 To: 12 / 31 / 2013

14031171645

	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))	11,910.00	11,910.00
(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))	11,910.00	11,910.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	0.00
(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))	6,054.03	6,054.03
8. Cash on Hand at Close of Reporting Period (from Line 27)	5,855.97	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** 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) — Page **3**

Write or Type Committee Name

JOE MARTINEZ FOR CONGRESS

Report Covering the Period: From: 10 / 01 / 2013 To: 12 / 31 / 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	11,910.00	11,910.00
(ii) Unitemized		
(iii) TOTAL of contributions from individuals ▶	11,910.00	11,910.00
(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))	11,910.00	11,910.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS: (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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	11,910.00	11,910.00

14031171646

FE5AN018

14031171647

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	6,054.03	6,054.03
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. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	6,054.03	6,054.03

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	0.00
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	11,910.00
25. SUBTOTAL (add Line 23 and Line 24)	11,910.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	6,054.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	5,855.97

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)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

14031171648

A. Full Name (Last, First, Middle Initial)
The Terrance Group
Mailing Address 201 North Union, Suite 410
City Alexandria, State VA Zip Code 22314
Poll Data
Purpose of Disbursement
Joe Martinez
Candidate Name
House of Representatives
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: #26
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Category/ Type
Date of Disbursement 11 / 14 / 2013
Amount of Each Disbursement this Period 5000.00

B. Full Name (Last, First, Middle Initial)
Republican Party of Miami-Dade
Mailing Address 1460 NW 107 Ave., Doral, FL 33172
City State Zip Code
Fees
Purpose of Disbursement
Joe Martinez
Candidate Name
House of Representative
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 26
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Category/ Type
Date of Disbursement 12 / 12 / 2013
Amount of Each Disbursement this Period 350.00

C. Full Name (Last, First, Middle Initial)
Dark Horse Strategies
Mailing Address 3663 SW 8th St, #205, Miami, FL 33135
City State Zip Code
consulting
Purpose of Disbursement
Joe Martinez
Candidate Name
House of Representatives
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 26
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Category/ Type
Date of Disbursement 12 / 12 / 2013
Amount of Each Disbursement this Period 140.00

SUBTOTAL of Disbursements This Page (optional) 5,140.00

TOTAL 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)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

PAGE OF

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NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

14031171649

A.
Full Name (Last, First, Middle Initial): Enlys Escalona
Mailing Address: 210 Dunal Ave., Apt. 63, Miami, FL 33054
City: | State: | Zip Code:
Purpose of Disbursement: web page
Candidate Name: Joe Martinez
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 26
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 12 / 2013
Amount of Each Disbursement this Period: 500.00

B.
Full Name (Last, First, Middle Initial): Anedot
Mailing Address: Third Street, Suite 2B
City: Baton Rouge | State: LA | Zip Code: 70801
Purpose of Disbursement: merchant card fees
Candidate Name: Joe Martinez
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 26
Disbursement For: ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 30 / 2013
Amount of Each Disbursement this Period: 64.03

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: | State: | Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) 564.03

TOTAL This Period (last page this line number only) 60564.03

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE OF

FOR LINE NUMBER: (check only one) ☐ 13a ☐ 13b

NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election: ☐ Primary ☐ General ☐ Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period

TERMS

Date Incurred (M M / D D / Y Y Y Y) | Date Due (M M / D D / Y Y Y Y) | Interest Rate ____ % (apr) | Secured: ☐ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City State ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14031171650

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for Information found on Page ____ of Schedule C

NAME OF COMMITTEE (In Full)

JOE MARTINEZ FOR CONGRESS

FEC IDENTIFICATION NUMBER

C

LENDING INSTITUTION (LENDER)
Full Name

Amount of Loan

Interest Rate (APR) %

Mailing Address

City State Zip Code

Date Incurred or Established M M / D D / Y Y Y Y

Date Due M M / D D / Y Y Y Y

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred M M / D D / Y Y Y Y

B. If line of credit,
Amount of this Draw:

Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify: _____

What is the value of this collateral?

Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Date account established: M M / D D / Y Y Y Y

Location of acoount:

Address:

City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER
Typed Name
Signature

DATE M M / D D / Y Y Y Y

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTARVE
Typed Name
Signature Title

DATE M M / D D / Y Y Y Y

14031171651

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER: (check only one)
- ☐ 9
- ☐ 10

NAME OF COMMITTEE (In Full)

JOE MARTINEZ FOR CONGRESS

14031171652

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶	
2) **TOTALS** This Period (last page this line number only) ▶	
3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶	

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full)	Report Covering Period: From:	To:
JOE MARTINEZ FOR CONGRESS	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y

	Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A			
B	Column Total Last Page Only.....		

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B						

	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B						

	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B						

	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B						

	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B						

14031171653

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 ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

PAGE OF

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NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

14031171654

A. Full Name (Last, First, Middle Initial)
Krest Jr., Larry
Mailing Address
302 E. Prospect Ave.
City: Ottawa State: IL Zip Code: 61350
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 10 / 11 / 2013
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Reinhart, John F.
Mailing Address
1528 Coral Ridge Dr.
City: Ft. Lauderdale, State: FL Zip Code: 33304
FEC ID number of contributing federal political committee: C
Name of Employer: self
Occupation: plumbing
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 2500.00
Date of Receipt: 10 / 11 / 2013
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Oves, Roniel
Mailing Address
2449 SW 153 Pass
City: Miami State: FL Zip Code: 33185
FEC ID number of contributing federal political committee: C
Name of Employer: Law Office of Corredor, Husseini, et al.
Occupation: Office Manager
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 200.00
Date of Receipt: 11 / 09 / 2013
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional): 5200.00

TOTAL This Period (last page this line number only):

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 ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

PAGE OF

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NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

14031171655

A. Full Name (Last, First, Middle Initial)
Miro, Steven
Mailing Address
4506 SW 132nd PL
City: Miami, Fl State: Zip Code: 33175
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: paralegal
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 150.00
Date of Receipt: 11 / 08 / 2013
Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Reboiro, Adis
Mailing Address
10106 SW 22nd Terr.
City: Miami, Fl State: Zip Code: 33165
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: homemaker
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 2,500.00
Date of Receipt: 12 / 10 / 2013
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Reboiro, Guillermo
Mailing Address
10106 SW 22nd Terr
City: Miami, Fl State: Zip Code: 33165
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: Retired
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 2500.00
Date of Receipt: 12 / 10 / 2013
Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional): 5,150.00

TOTAL This Period (last page this line number only):

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 ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

PAGE OF

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NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

14031171656

A.
Full Name (Last, First, Middle Initial)
Martinez, Araleen
Mailing Address
15450 SW 20 Lane
City: Miami State: FL Zip Code: 33185
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 5.00

Date of Receipt: 11 / 13 / 2013
Amount of Each Receipt this Period: 5.00

B.
Full Name (Last, First, Middle Initial)
Oves, Roniel
Mailing Address
2449 SW 153 Passage
City: Miami, FL State: Zip Code: 33185
FEC ID number of contributing federal political committee. C
Name of Employer
Occupation: manager
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:

Date of Receipt: 11 / 20 / 2013
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Miro, Steven
Mailing Address
4506 SW 132 Pl
City: Miami State: FL Zip Code: 33175
FEC ID number of contributing federal political committee. C
Name of Employer: Law Firm
Occupation: Paralegal
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:

Date of Receipt: 11 / 20 / 2013
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional): 1250.00

TOTAL This Period (last page this line number only):

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 OF

☐ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

14031171657

A.
Full Name (Last, First, Middle Initial): Armely, Christopher
Mailing Address: 13421 SW 24 St.
City: Miami State: FL Zip Code: 33175
FEC ID number of contributing federal political committee: C
Name of Employer: Early Learning Coalition of M.D. Occupation: Ed. Specialist
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: 11 / 20 / 2013
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): Almanza, Nelly
Mailing Address: 2150 Coral Way, # 1A
City: Coral Gables, State: FL Zip Code: 33145
FEC ID number of contributing federal political committee: C
Name of Employer: Graphic Design Firm Occupation: Project Mgr.
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: 11 / 25 / 2013
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): Orozco, Jomar
Mailing Address: 9371 SW 55 St.
City: Miami State: FL Zip Code: 33165
FEC ID number of contributing federal political committee: C
Name of Employer: West Kendall Toyota Occupation: Asst. Service Mgr.
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: 11 / 26 / 2013
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional): 45.00

TOTAL This Period (last page this line number only):

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 OF

☐ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
JOE MARTINEZ FOR CONGRESS

14031171658

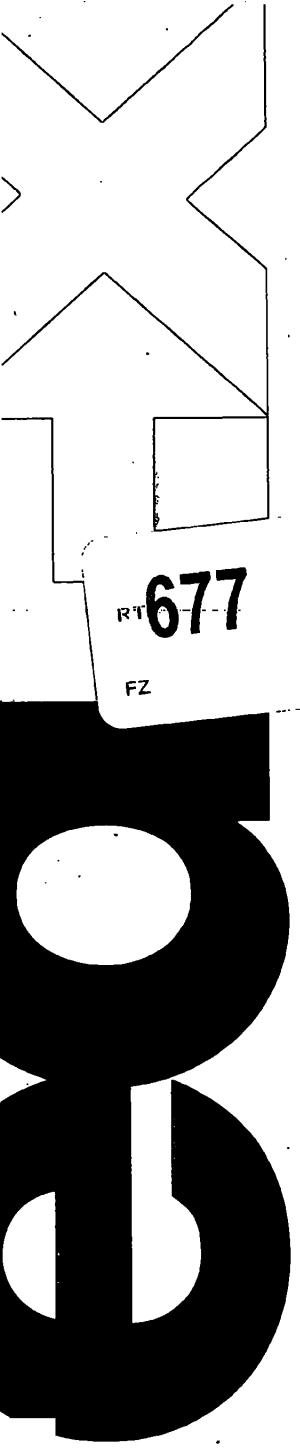
A.
Full Name (Last, First, Middle Initial): Diaz, Maria G.
Mailing Address: 14042 SW 48 St.
City: Miami, Fl State: 33175 Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: Retired
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: 11 / 20 / 2013
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): Peraza, Joe A.
Mailing Address: 11126 SW 6 St.
City: Miami State: Fl Zip Code: 33174
FEC ID number of contributing federal political committee: C
Name of Employer: Sherwin-Williams
Occupation: Sales Rep
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: 12 / 02 / 2013
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): Miro, Steven
Mailing Address: 4506 SW 132 Pl
City: Miami State: Fl Zip Code: 33175
FEC ID number of contributing federal political committee: C
Name of Employer: Law Firm
Occupation: Paralegal
Receipt For: ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: 12 / 22 / 2013
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional): 200.00

TOTAL This Period (last page this line number only):



RT 677 6

9441
01.31

FZ

From: (305) 442-2200 Origin ID: JDMA
Gloria Maggiolo
GOLDSTEIN SCHECHTER ET AL
2121 PONCE DE LEON BLVD SUITE 1100

CORAL GABLES, FL 33134

FedEx Express

J14101312270326

Ship Date: 30JAN14
ActWgt: 10 LB
CAD: 104176170/INET3490

Delivery Address Bar Code

SHIP TO: (305) 442-2200 X 250 BILL SENDER

Federal Election Commission
999 E Street, NW

WASHINGTON, DC 20463

Ref # joe garcia for congress
Invoice #
PO #
Dept #

FRI - 31 JAN 10:30A
PRIORITY OVERNIGHT

TRK# 0201 7977 7801 9441

XC RDVA

20463
DC-US
IAD

522G1/D6EC/F220

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14031171660

Federal Election Commission
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☐ USPS Registered/Certified	Postmarked (R/C)
☐ USPS Priority Mail	Postmarked
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☐ Postmark Illegible	
☐ No Postmark	
☑ Overnight Delivery Service (Specify): fed ex	Shipping Date 1/30/14
	Next Business Day Delivery ☑
☐ Received from House Records & Registration Office	Date of Receipt
☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked
PREPARER	DATE PREPARED 1/31/14

(8/2013)