

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

(1) JOSHUA LAROSE
Name

(2) P. O. BOX 191328
Address (number and street)

MIAMI BEACH, FL 33119-1328
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): MAYOR OF MIAMI BEACH

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

OFFICE USE ONLY

RECEIVED
2009 SEP 8 PM 4:34
CITY CLERK'S OFFICE

(5) REPORT IDENTIFIERS

Cover Period: From 07 / 01 / 09 To 09 / 11 / 09 Report Type FL-09

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____

Loans \$ 2,000.00

Total Monetary \$ _____

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1,360.00

Transfers to Office Account \$ _____

Total Monetary \$ _____

(8) Other Distributions

\$ _____

(9) TOTAL Monetary Contributions To Date

\$ 2,000.00

(10) TOTAL Monetary Expenditures To Date

\$ 1,360.00

(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) VALENCIA ST LOUIS

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Valencia St Louis
Signature

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

(Type name) JOSHUA LAROSE

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

X [Signature]
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name JOSHUA LAROSE **(2) I.D. Number** 52

(3) Cover Period 07 / 01 / 09 through 09 / 11 / 09 **(4) Page** 2 of 3

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
09 / 09 / 09	Joshua Larose PO BOX 191328 MIAMI BEACH, FL 33119-1328	I	CEO	CHE			2000.00
01							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name JOSHUA LAROSE

(2) I.D. Number 52

(3) Cover Period 07 / 01 / 09 through 09 / 11 / 09

(4) Page 3 of 3

(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
(6) Sequence Number					
09 / 10 / 09	CITY OF MIAMI BEACH 1700 Convention Center Drive Miami Beach, FL 33139	Qualifying Fee	Mon		\$1,360.00
01					
//					
//					
//					
//					
//					
//					

DS-DE 14 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

Page 3 of 3