

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

(1) Mayra Uribe  
Name

(2) 2480 E. Michigan Street  
Address (number and street)

Orlando, Florida 32806

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate (office sought): Orange County Commission, District 4

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

2007 APR 15 P 4:54

**(5) REPORT IDENTIFIERS**

Cover Period: From 01 / 01 / 09 To 03 / 31 / 09 Report Type Q1

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 6,495.00

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

In-Kind \$ 2,005.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ \_\_\_\_\_

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

**(8) Other Distributions**

\$ \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ 6,495.00

**(10) TOTAL Monetary Expenditures To Date**

\$ 0.00

**(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) Zulfiqar Ahmed

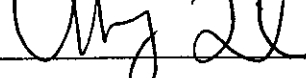
Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

**X**   
Signature

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

(Type name) Mayra Uribe

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

**X**   
Signature