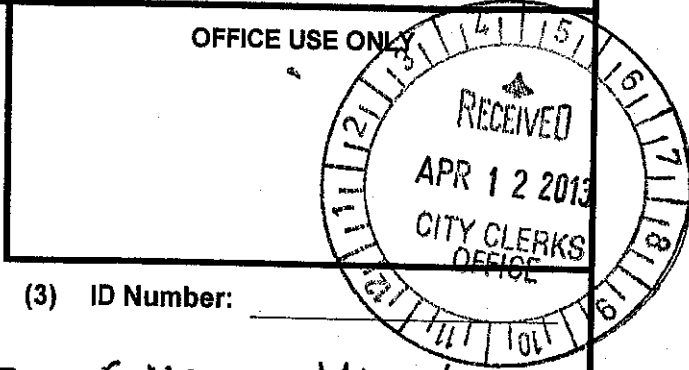


**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) KEVIN BURNS
Name
(2) 2065 ALAMANDA DR
Address (number and street)
Miami, FL 33181
City, State, Zip Code



CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): MAYOR-CITY OF NORTH MIAMI

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 4/1/13 To 4/5/13 Report Type 32 D.

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1,025.00
Loans \$ -0-
Total Monetary \$ 1,025.00
In-Kind \$ -

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1,078.13
Transfers to Office Account \$ -0-
Total Monetary \$ 1,078.13

(8) Other Distributions \$ -0-

(9) TOTAL Monetary Contributions To Date \$ 20,648

(10) TOTAL Monetary Expenditures To Date \$ 11,903.30

(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) KEVIN BURNS

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) KEVIN BURNS

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

X [Signature]
Signature

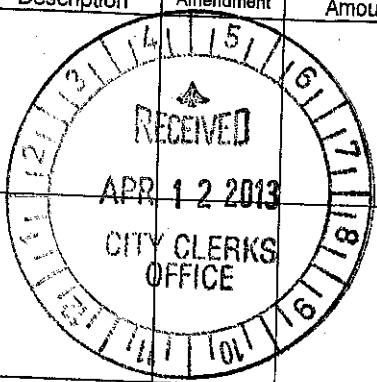
CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Kevin Burns

(2) I.D. Number _____

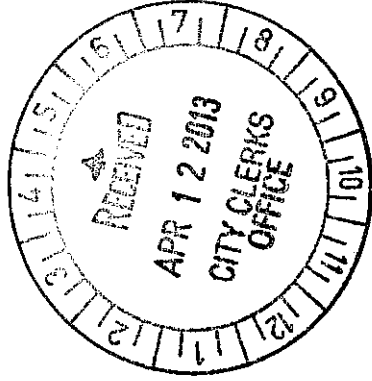
(3) Cover Period 4/1/13 through 4/30/13

(4) Page _____ of _____

(5) Date	(6) Sequence Number	(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
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KEVIN BUREAS

Seq	Date	Contributors Name	Occupation	Type	Address	Amount
65	4/1/13	Galleria D'Epoca inc	Retail	Cke	800 N.E. 125st N. Miami Fl.	\$100.00
66	4/3/13	Dr. Annette Weissman	N/A	Cke	12415 Keystone Island dr. N.M.	\$75.00
67	4/3/13	Janet Tarvares	N/A	Cke	Ukn	\$50.00
68	4/4/13	BER Enterprise 449 inc.	Business	Cke	18280 W. Dixie Hwy Miami	\$250.00
69	4/4/13	Museum Plaza	Business	Cke	822 N.E. 125st. N.M.	\$500.00
70	4/5/13	William E. Welsh	N/A	Cke	2032 N.E. 120th Rd. N.M.	\$50.00
						\$1,025.00

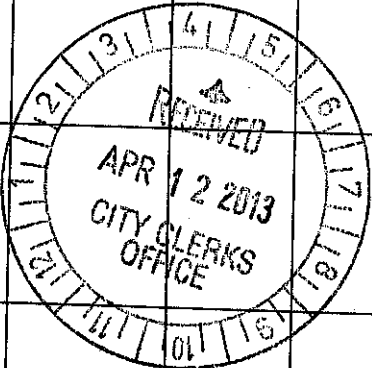


CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name KEVIN Burns (2) I.D. Number _____

(3) Cover Period 4/1/13 through 4/5/13 (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
(6) Sequence Number					
///	SEE ATTACHED				
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KEVIN BUENO

EXPENDITURES

Date	Seq Name	Address	Purpose	Type	Amount
4/1/13	57 Sunshine B P	12955 Biscayne Blvd NM	Fuel	MON	\$35.00
4/1/13	58 Sunshine B P	12955 Biscayne Blvd NM	Fuel	MON	\$62.00
4/1/13	59 Biscayne Times	POBox 370566 Miami 33137	Ad	MON	\$665.00
4/3/13	60 North Miami Chamber	13100 W Dixie Hwy NM	Event Ticket	MON	\$60.00
4/4/13	61 Flip Burger	1699 NE 123rd St. NM	Meals/Vol.	MON	\$78.27
4/4/13	62 Javan Lumber	12721 NW 7th Ave NM	Sign Supplies	MON	\$80.86
4/5/13	63 Sunshine B P	12955 Biscayne Blvd NM	Fuel	MON	\$97.00

