FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) Stephen T. Millan	OFFICE USE ONLY 420					
Name						
(2) 9155 S. Dadeland Boulevard, Suite 1412,	Miami, FL 33156					
Address (number and street)						
City, State, Zip Code						
☐ CHECK IF ADDRESS HAS CHANGED	(3) ID Number:					
(4) Check appropriate box(es): X Candidate (office sought): County Court J						
☐ 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	12/4/2006 / Report Type TRF-0					
☑ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$0.00	Monetary Expenditures \$ 1,462.12					
Loans \$	Transfers to Office Account \$ 0.00					
Total Monetary \$	Total					
In-Kind \$	Monetary \$ 1,462.12					
	(8) Other Distributions \$0.00					
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
\$150,350.00	\$153,750.00_					
(11) CERT	IFICATION					
It is a first degree misdemeanor for any pers	on 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. I certify that I have examined this report and it is true, correct, and complete.						
(Type name)	(Type name)					
Individual (only for election eering commun.)	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)					
X	X					
Signature	Signature					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Stephen T. Millan			Z) I.D. Numbe	er4	20
	9/1/2006		12/4/2006			
(3) Cover Perio	od//	through		(4) Pag	je ¹	of ⁰
(o) oover rem	· · · · · · · · · · · · · · · · · · ·			\\.\.\.\.\.\.	,-	
(E)	(7)	(0)	(0)	(40)	(4.4)	(40)
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation	on Type	Description	Amendment	Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Stephen T. Mill	an	The state of the s	(2) I.D. Number	4	20	20
	9/1/2006	-	12/4/2006				
(3) Cover F	Period /	/through	1 1	(4) Page 1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
12/1/2006	Millan, Stephen 9155 S. Dadeland Blvd. Suite 1412 Miami, FL 33156	partial repayment of loan	МО		\$1,462.12
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