

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

(1) Miami Dade Citizens For Real Reform ECO
Name
 (2) 18910 NW 9 Avenue
Address (number and street)
Miami, FL 33161
City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1029670]
 Submitted on:
 7/8/2011 15:45:24 (eastern)

CHECK IF ADDRESS HAS CHANGED (3) ID Number: 1011

(4) **Check appropriate box(es):**
 Candidate (office sought): _____
 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 5/20/2011 To 6/30/2011 / Report Type QSF2-

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 5,000.00

Loans \$ 0.00

Total Monetary \$ 5,000.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 4,920.00

Transfers to Office Account \$ 0.00

Total Monetary \$ 4,920.00

(8) Other Distributions
 \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 5,000.00

(10) TOTAL Monetary Expenditures To Date
 \$ 4,920.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer</p> <p>X _____</p> <p>Signature</p>	<p>I certify that I have examined this report and it is true, correct, and complete.</p> <p>(Type name) _____</p> <p><input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization)</p> <p>X _____</p> <p>Signature</p>
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Miami Dade Citizens For Real Reform ECO

(2) I.D. Number 1011

(3) Cover Period 5/20/2011 through 6/30/2011

(4) Page 1 of 1

(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					
5/24/2011 //	Mcmillan , Althea 10371 SW 152nd St Miami, Fl 33157	gotv	MO		\$1,100.00
1					
5/24/2011 //	Green, Johnnie 2091 Wilmington Miami, Fl 33054	gotv	MO		\$1,900.00
2					
5/24/2011 //	Roundtree, Junita 5861 NW 9th Ave Miami, Fl 33147	gotv	MO		\$1,000.00
3					
5/24/2011 //	Sturdivant, Jauquina 7100 NW 17th Ave Plantation, Fl 33313	gotv	MO		\$420.00
4					
5/24/2011 //	Afrovisions/PR, 1348 NE 147th St Miami, Fl 33161	gotv	MO		\$500.00
5					
//					
//					
//					