

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Friends of Miami-Dade College
 Name
 (2) 1450 Brickell Ave; Suite 1800
 Address (number and street)
Miami, FL 33131
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1143765]
 Submitted on:
 8/8/2017 09:38:24 (eastern)

Check here if address has changed

(3) ID Number: 734

(4) Check appropriate box(es):

- Candidate Office Sought: _____
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 7 / 1 / 2017 To 7 / 31 / 2017 Report Type: 17M07

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 6 , 671 . 66

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 6 , 671 . 66

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ 1 , 574 , 723 . 96

(10) TOTAL Monetary Expenditures To Date

\$, 258 , 765 . 43

(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) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Friends of Miami-Dade College (2) I.D. Number 734

7/1/2017 through 7/31/2017

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(5) Date	(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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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Friends of Miami-Dade College

(2) I.D. Number 734

(3) Cover Period 7/1/2017 through 7/31/2017

(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
7/14/2017 / /	BALLARD PARTNERS, 403 EAST PARK AVENUE TALLAHASSEE, FL 32301	consulting jul 2017	MO		\$6,666.66
1					
7/31/2017 / /	REGIONS BANK, 2810 PONCE DE LEON BLVD MIAMI, FL 33134	bank fees	MO		\$5.00
2					
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