

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kionne McGhee
 Name
 (2) PO Box 700388
 Address (number and street)
Miami, FL 33170
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1196172]
 Submitted on:
 12/10/2019 14:15:05 (eastern)

Check here if address has changed (3) ID Number: 2263

(4) Check appropriate box(es):
 Candidate Office Sought: County Commission District 09
 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 10 / 1 / 2019 To 10 / 31 / 2019 Report Type: 19M10
 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 \$, , 0 . 00
 Transfers to Office Account \$, , 0 . 00
 Total Monetary \$, , 0 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 128 , 472 . 05

(10) TOTAL Monetary Expenditures To Date
 \$, 18 , 782 . 44

(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 Kionne McGhee (2) I.D. Number 2263

10/1/2019 through 10/31/2019

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

(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
(6) Sequence Number		Type	Occupation				
10/28/2019 / /	Raphael, Millie 1581 Brickell Ave Miami, FL 33129	I	bus owner	CH		Delete	\$250.00
1							
10/28/2019 / /	Raphael, Millie 1581 Brickell Ave Miami, FL 33129	I	strategist consultant	CH		Add	\$250.00
2							
10/29/2019 / /	Fletchy's LLC, 15840 SW 148 TERRACE Miami, FL 33196	B	info requested	CH		Delete	\$1,000.00
3							
10/29/2019 / /	Fletchy's LLC, 15840 SW 148 TERRACE Miami, FL 33196	B	constructi on consulting	CH		Add	\$1,000.00
4							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kionne McGhee

(2) I.D. Number 2263

(3) Cover Period 10/1/2019 through 10/31/2019

(4) Page 1 of 0

(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					
/ /					
/ /					
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