FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) Committee for Recall of Miami-Dade Commissioners  Name  (2) 9400 S. Dadeland Blvd. Suite 110  Address (number and street)  Miami, FL 33156-0000  City, State, Zip Code	OFFICE USE OFFICE USE OF AFT COLORS DEPAR				
Check box if address has changed  (4) Check appropriate box(es):  Candidate (office sought):  X Political Committee Committee of Continuous Existence Party Executive Committee Electioneering Communication  (3) I.D. Number: 00000					
(5) REPORT IDENTIFIERS           Cover Period:         From					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
Cash & Checks \$0.00  Loans \$0.00	Monetary Expenditures  Transfers to Office Account  \$0.00				
Total Monetary \$0.00	Total Monetary \$0.00				
In-Kind\$0.00	(8) Other Distributions\$0.00				
(9) TOTAL Monetary Contributions to Date	(10) TOTAL Monetary Expenditures to Date				
\$43,895.41	\$43,840.84				
(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  McHenry Hamilton  Individual (only for electioneering commun.)  X  Signature	I certify that I have examined this report and it is true, correct and complete  Luis Sanchez  Candidate  X  Cardiman (only for PC, PTY & electioneering commun. organization)  Signature				

## **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name	Committee for Recall of Miami-Dade Commissioners			(2) I.D. Number		00000	
(3) Cover Period 07/01/2007 - 09/30/2007		(4) Page		0 of 0			
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)	Co	ntributor		In-kind		
(6) Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	Description	Amendment	Amount
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## **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name	Committee for Recall of Miami-Dade Commis	sioners	(2) I.D. Number	00000		
(3) Cover Perio	od 07/01/2007 - 09/30/2007	· · · ·	(4) Page	0 of 0		
(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	
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## **CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS**

THIS FORM APPLIES TO POLITICAL COMMITTEES, COMMITTEES OF CONTINUOUS EXISTENCE AND PARTY EXECUTIVE COMMITTEES ONLY.

(1) Name	Committee for Recall of Miami-Dade Commis	sioners	(2) I.D. Number	00000		_
(3) Cover Peri	od 07/01/2007 - 09/30/2007		(4) Page	0 of 0		_
(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)	Related Expenditures	Amendment	Amount	
	Nothing to report on the	his form		ELECTIO	RECEI 2009 JAN 22	
		·		DADE COUNTY NS DEPARTMENT	SH 15:	
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## **CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS**

(1) Name	Committee for Recall of Miami-Dade Commission	ners	(2) I.D. Number	00000	
(3) Cover Perio	od 07/01/2007 - 09/30/2007		(4) Page	0 of 0	
(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Name of Financial Institution Street Address & City, State, Zip Code	Transfer Type	Nature of Account	Amendment	Amount
	Nothing to report on thi	s form		ELECTIONS	R E (
				ADE COUNTY S DEPARTHENT	RECEIVED 9 JAN 22 PM 12: 09
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