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  Check box if address has changed  (4) Check appropriate box(es):  Candidate (office sought):  Political Committee  Committee of Continuous Existence	ZUUB SEÖFFIGE USE GNLEG  HAALL BADE ELECTIONS DEPARTMENT  (3) I.D. Number: 00000  eck if PC has DISBANDED  eck if CCE has DISBANDED				
Fairy Executive Committee	eck if no other electioneering communication reports will be filed				
	IDENTIFIERS  Report Type: F3				
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
Cash & Checks \$0.00  Loans \$0.00	Monetary Expenditures \$0.00  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				
\$39,300.00	\$38,462.69				
(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  McHenry Hamilton  Deputy Treasurer	I certify that I have examined this report and it is true, correct and complete  Luis Sanchez  Chefman (only for PC, PTY & sectioneering commun. organization)  Signature				
DS-DE 12 (Rev. 08/04)	Adjutant Software - Campaign ToolBox				

Adjutant Software - Campaign ToolBox

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

Committee for Recall of Miami-Dade Commissioners			(2) I.D. Number		00000		
eriod 08/12/2006 - 08/31/2006			(4) Page		0 of 0		
(7)		(8)	(9)	(10)	(11)	(12)	
(D) (Last, Surix, Flist, Middle)		ntributor		In-kind			
Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	Description		Amount	
Nothing to report on	this	form				A some and a some a som	
					INTERNATIONAL DE CONTRACTOR DE	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	08/12/2006 - 08/31/2006  (7)  Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Od 08/12/2006 - 08/31/2006  (7)  Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code  Type	08/12/2006 - 08/31/2006  (7) (8)  Full Name (Last, Suffix, First, Middle) Street Address & Contributor	(4) Page (A) Page (B) (B) (B) (Contributor (Contribution Type (Contrib	Contributor   Contribution   Contr	Od 08/12/2006 - 08/31/2006 (4) Page 0 of 0  (7) (8) (9) (10) (11)  Contributor Type Occupation Occupation Occupation Type Occupation	

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

(1) Name	Committee for Recall of Miami-Dade Commissioners		(2) I.D. Number	00000	
(3) Cover Perio	eriod 08/12/2006 - 08/31/2006		(4) Page	0 of 0	
(5)	(7)	(8)	(9)	(10)	(11)
Date (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 Commissioners		(2) I.D. Number	00000	
(3) Cover Perio	od 08/12/2006 - 08/31/2006	(4) Page	0 of 0		
(5)	(7)	(8)	(9)	(10)	(11)
Date (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	nis form			

## **CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS**

(1) Name	Committee for Recall of Miami-Dade Commissioners		(2) I.D. Number	00000	
(3) Cover Perio	od 08/12/2006 - 08/31/2006	(4) Page			
(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	is form			
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McHENRY HAMILTON,

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Kendall, Florida 33156-2814

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