FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS					
CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) Committee for Recall of Miami-Dade Commissioners	OFFICE USE ONLY				
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					
	(3) I.D. Number: <u>00000</u>				
(4) Check appropriate box(es):					
Candidate (office sought):					
X Political Committee	eck if PC has DISBANDED				
	eck if CCE has DISBANDED				
	eck if no other electioneering communication reports will be filed				
	IDENTIFIEDS				
	IDENTIFIERS				
Cover Period: From 09/01/2006 To 09/15/2006	6 Report Type: <u>G1</u>				
X Original Amendment Special Elec	tion Report Independent Expenditure Report				
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
	Monetary				
Cash & Checks\$0.00	Expenditures \$0.00				
	Transfers to Office				
Loans\$0.00	Account\$0.00				
Total Monetany \$0.00	Total Monetany \$0.00				
Total Monetary	Total Monetary				
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) CERT	IFICATION				
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	I certify that I have examined this report and it is				
true, correct and complete	true, correct and complete				
McHenry Hamilton	Luis Sanchez				
Individual (only for electioneering X Treasurer Story Deputy_Treasurer	Candidate Chairman (only for PC, PTY &				
Commun.)	1 A A				
× /11 pm Haman					
Signature Signature Signature Signature	Signature V				
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## **CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS**

(1) Name	Committee for Recall of Miami-Dade Commissioners			(2) I.D. Number		00000	
(3) Cover Peric	cover Period 09/01/2006 - 09/15/2006			(4) Page		0 of 0	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6)	Full Name (Last, Suffix, First, Middle)	Co	ntributor		In-kind		
Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type		Amendment	Amount
	Nothing to report on	this	form				
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## **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name	Committee for Recall of Miami-Dade Commit	ssioners	(2) I.D. Number	00000	
(3) Cover Peri	3) Cover Period 09/01/2006 - 09/15/2006			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
	Nothing to report on t	his form			
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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 09/01/2006 - 09/15/2006		(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			
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## **CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS**

(1) Name	Committee for Recall of Miami-Dade Commission	oners	(2) I.D. Number	00000	
(3) Cover Perio	od 09/01/2006 - 09/15/2006		(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			
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