

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Keon Hardemon
 Name _____
 (2) _____
 Address (number and street) _____

 City, State, Zip Code _____

RECEIVED
 OFFICE USE ONLY
 2015 DEC 10 PM 4:24
 OFFICE OF THE CITY CLERK
 CITY OF MIAMI

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es): Miami Commissioner District 5

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 11 / 01 / 2015 To 11 / 30 / 2015 Report Type: M11

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
 \$ _____ , _____ , 100 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , _____ , 0 . 00

(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:

Adia McKenzie
 (Type name)

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

X Adia K. McKenzie
 Signature

Keon Hardemon
 (Type name)

Candidate Chairperson (only for PC and PTY)

X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

Keon Hardemon

(1) Name _____ (2) I.D. Number _____

(3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
/ /	NOTHING TO REPORT						
/ /							
/ /							
/ /							
/ /							
/ /							

RECEIVED
 2015 DEC 10 PM 4:24
 OFFICE OF THE CITY CLERK
 CITY OF MIAMI

CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name Keon Hardemon
 (3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015

(2) I.D. Number _____
 (4) Page 1 of 1

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
(6) Sequence Number					
/ /	NOTHING TO REPORT				
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

RECEIVED
 2015 DEC 10 PM 4:25
 OFFICE OF THE CITY CLERK
 CITY OF MIAMI

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Keon Hardemon (2) I.D. Number _____

(3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015 (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) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
(6) Sequence Number						
/ /	NOTHING TO REPORT					
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						

RECEIVED
 2015 DEC 10 PM 4:25
 OFFICE OF THE CITY CLERK
 CITY OF MIAMI

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Keon Hardemon

(2) I.D. Number _____

(3) Cover Period 11 / 01 / 2015 through 11 / 30 / 2015

(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
/ /	NOTHING TO REPORT				
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

RECEIVED
 2015 DEC 10 PM 4:25
 OFFICE OF THE CITY CLERK
 CITY OF MIAMI