

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) CHRISTIAN CANACHE CAMPAIGN
 Name
 (2) P.O. BOX 310655
 Address (number and street)
MIAMI FLORIDA 33231
 City, State, Zip Code

OFFICE USE ONLY
 RECEIVED
 2017 FEB -7 AM 8:34
 OFFICE OF THE CITY CLERK
 CITY OF MIAMI

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

(4) Check appropriate box(es): MAYOR CITY OF MIAMI
 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 01 / 01 / 2017 To 01 / 31 / 2017 Report Type: M1
 Original Amendment Special Election Report

(6) **Contributions This Report**

Cash & Checks \$ 0 , , .
 Loans \$ 0 , , .
 Total Monetary \$ 0 , , .
 In-Kind \$ 0 , , .

(7) **Expenditures This Report**

Monetary Expenditures \$ 0 , , .
 Transfers to Office Account \$ 0 , , .
 Total Monetary \$ 0 , , .

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

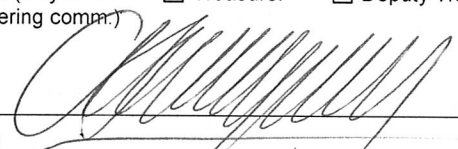
(9) **TOTAL Monetary Contributions To Date**
 \$ 0 , , .

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

(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:

CHRISTIAN CANACHE
 (Type name)
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
X
 Signature 

CHRISTIAN CANACHE
 (Type name)
 Candidate Chairperson (only for PC and PTY)
X
 Signature 