CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) Zoraida A. Barreiro Campaign Name	OFFICE USE ONLY SERVICE OF THE PROPERTY OF THE				
(2) 2101 SW 4 Avenue Address (number and street)	OF MAN				
Miami, FL 33129					
City, State, Zip Code	[
Check here if address has changed	(3) I.D. Number: 00000				
(4) Check appropriate box(es):	District 2				
X Candidate (office sought): City of Miami Commission Political Committee (PC) Electioneering Communications Org. (ECO)	eck here if PC or ECO has disbanded				
Party Executive Committee (PTY)	eck here if PTY has disbanded				
Independent Expenditure (IE) (also covers an individual making electioneering communications)	eck here if no other IE or EC reports will be filed				
(5) REPORT I					
Cover Period: From <u>03/01/2017</u> To <u>03/31/2017</u>	Report Type: M3				
Original X Amendment Special Elec	tion Report				
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT				
Cash & Checks \$27,138.00	Monetary Expenditures \$932.95				
Loans \$0.00	Transfers to Office Account \$0.00				
Total Monetary \$27,138.00	Total Monetary\$932.95				
In-Kind\$0.00	(8) Other Distributions \$0.00				
(9) TOTAL Monetary Contributions to Date	(10) TOTAL Monetary Expenditures to Date				
\$93,303.00	\$7,975.21				
(11) CERTI	_				
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:					
Zoraida A. Barreiro	7-ida A Dadim				
Individual (only for IE o Treasurer Deputy Treasurer	Zoraida A. Barzeiro Chairman (only for PC and PTY)				
electioneering commun.)					
	X70///				
This form is based on DS-DE 12 (Rev. 11/13)	Adjutant Workshop, Inc Campaign ToolBox				

FIRST AMENDMENT TO REPORT FOR PERIOD

FROM 3/1/7 TO 3/31/17

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Zoraida A. Barreiro Campaign			(2) I.D.	Number	00000	
(3) Cover Peri	iod 03/01/2017 - 03/31/2017			(4) Pag	je	0 of 0	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ntributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
							-
	Nothing to report on	this	form				
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	FIRST AMENDMENT TO REPORT FOR PERIOD FROM 3 1 17 TO 3 31 17						

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

00000 (1) Name Zoraida A. Barreiro Campaign (2) I.D. Number 03/01/2017 - 03/31/2017 (3) Cover Period (4) Page 1 of 1 (5) (8) (9) (10)(11)(7) Date Full Name (6) (Last, Suffix, First, Middle) Purpose Street Address & City, State, Zip Code Expenditure Sequence (add office sought if Amendment Amount Number contribution to a candidate) Туре \$ 58.83 **Staples** Office Supplies MON ADD 03/02/2017 2120 SW 32 Avenue Coral Gables, FL 33134-0000 1 L2 Political Voter Data MON ADD \$477.98 03/15/2017 18912 North Creek Bothell, WA 98011-0000 2 ADD Stone Ridge Group Graphic Design MON \$ 350.00 03/16/2017 4400 North Point Parkway Alpharetta, GA 30022-0000 3 ADD Miami-Dade County Elections Voter Data MON \$ 20.00 03/21/2017 Department 2700 NW 87th Ave # 100 Doral, FL 33172-0000 4 Anedot Service Charge MON ADD \$ 26.14 03/23/2017 PO Box 84314 Baton Rouge, LA 70884-0000 5 FIRST AMENDMENT TO REPORT FOR PERIOD

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name	Zoraida A. Barreiro Campaign	(2) I.D. Number	00000		
(3) Cover Period 03/01/2017 - 03/31/2017			(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	nis form			
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	FIRST AMENDMENT TO REPORT FOR PERIOD FROM 3 17 TO 3 3 1 17				

This form is based on DS-DE 14A (Rev. 08/03) [Note about Committees has been removed.]

Adjutant Software, Inc. - Campaign ToolBox

CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS

(1) Name	Zoraida A. Barreiro Campaign		(2) I.D. Number	00000	
	od 03/01/2017 - 03/31/2017		(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	is form			
	·				
	·			0FF 10F	2017.
				OFFICE OF THE CITY CLERK	RECEIVED 2017 JUN 12 PM 3: 05
	FIRST AMENDMENT TO REPORT FOR PERIOD FROM 3 1 17 TO 3 31 17			LRK	05