

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Goggins
 Name
 (2) 701 Brickell Ave, Suite 1150
 Address (number and street)
Miami, FL 33131
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1291456]
 Submitted on:
 2/1/2023 10:01:11 (eastern)

Check here if address has changed (3) ID Number: 94

(4) Check appropriate box(es):
 Candidate Office Sought: Commissioner District 2
 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 1 / 1 / 2023 To 1 / 26 / 2023 Report Type: S01
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 500 . 00
 Loans \$, , 0 . 00
 Total Monetary \$, 1 , 500 . 00
 In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 682 . 00
 Transfers to Office Account \$, , 0 . 00
 Total Monetary \$, , 682 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 1 , 600 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, , 682 . 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:

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

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

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Michael Goggins (2) I.D. Number 94
 (3) Cover Period 1/1/2023 through 1/26/2023 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
1/12/2023 / /	Goggins, Michael J 1200 Brickell Bay Drive Apt 2101 Miami, FL 33131	S	wealth manager	CH			\$700.00
1							
1/11/2023 / /	Goggins, Edward 7433 Dry CreekDr 1-B Grand Blanc, MI 48439	I	retired	CH			\$250.00
2							
1/12/2023 / /	Hernandez, Jose 2636 sw 30 Ave Miami, FL 33133	I		CH			\$100.00
3							
1/13/2023 / /	Goggins, Daniel 7831 E. Hampshire Rd. Orange, CA 92867	I		CH			\$100.00
4							
1/21/2023 / /	McAliley, Chris 2843 S. Bayshore Drive Miami, FL 33133	I	retired	CH			\$200.00
5							
1/26/2023 / /	Nadal, Richard 51 Bay Heights Drive Miami, FL 33133	I	physician	CH			\$150.00
6							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Goggins

(2) I.D. Number 94

(3) Cover Period 1/1/2023 through 1/26/2023

(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
(6) Sequence Number					
1/12/2023 //	City of Miami, 3500 Pan American Drive Miami, FL 33133	campaign registration	MO		\$682.00
1					
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