

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Grieco Campaign
 Name
 (2) 175 SW 7 Street, Suite 2410
 Address (number and street)
Miami, FL 33130
 City, State, Zip Code

RECEIVED
 2017 NOV -1 PM 3:17
 CITY OF MIAMI BEACH
 OFFICE OF THE CITY CLERK

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate Office Sought: Commission Group 2

- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)

- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 06 / 01 / 16 To 06 / 30 / 16 Report Type: M6

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 \$ _____ , _____ , _____
 Total Monetary \$ _____ , _____ , 0 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 34 , 600 . 00

(10) TOTAL Monetary Expenditures To Date

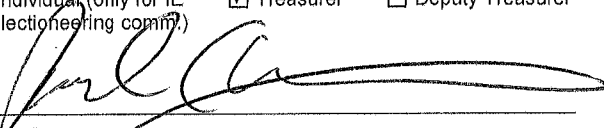
\$ _____ , _____ , 7 . 55

(11) Certification

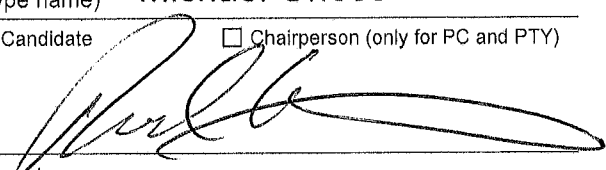
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) Michael Grieco
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
 Signature

(Type name) Michael Grieco
 Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Michael Grieco Campaign (2) I.D. Number _____

(3) Cover Period 06 / 01 / 16 through 06 / 31 / 16 (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)	(12)
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
06 / 27 / 16 1	Dana Berkowitz 5768 Pinetree Drive Miami Beach, FL 33140	IND	NONE	CHE		DEL	\$1000.00
06 / 27 / 16 35	Dana Berkowitz 5768 Pinetree Drive Miami Beach, FL 33140	IND	HOMEMAKER	CHE		ADD	\$1000.00
06 / 25 / 16 16	Milagros Rojas 10373 SW 116 Street Miami, FL 33176	INV	Realtor	CHE		DEL	\$1000.00
06 / 25 / 16 36	Milagros Rojas 10373 SW 116 Street Miami, FL 33176	IND	Realtor	CHE		ADD	\$1000.00
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Grieco Campaign

(2) I.D. Number _____

(3) Cover Period 06 / 01 / 16 through 06 / 31 / 16

(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					
/ /					
/ /					
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