

CAMPAIGN TREASURER'S REPORT SUMMARY

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

OFFICE USE ONLY

RECEIVED
 2017 NOV - 1 PM 3:18
 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 10 / 01 / 16 To 10 / 31 / 16 Report Type: M10

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 2 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 2 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 25 . 99

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 25 . 99

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 172 , 802 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 342 . 08


(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 10 / 01 / 16 through 10 / 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
10 / 26 / 16	Jessica Machado 103 NW 43 Place Miami Beach, FL 33126	IND		CHE		ADD	\$1.00
47							
10 / 26 / 16	Jessica Machado 103 NW 43 Place Miami Beach, FL 33126	IND		CHE		ADD	\$1.00
48							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Grieco Campaign

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 16 through 10 / 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					
10 / 26 / 16	PayPal 2211 North First Street San Jose, CA 95131	CC Processing Fee	MON	ADD	\$.03
8					
10 / 26 / 16	PayPal 2211 North First Street San Jose, CA 95131	CC Processing Fee	MON	ADD	\$.03
9					
10 / 12 / 16	Sabadell PO Box 5460 Hialeah, FL 33014	Bank Fee	MON	ADD	\$26.74
10					
10 / 28 / 16	Square, Inc. 1455 Market Street, Suite 600 San Francisco, CA 94103	Verification Fee Reversal	MON	ADD	-\$.81
11					
/ /					
/ /					
/ /					
/ /					
/ /					