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OFFICE ACCOUNT DISBURSEMENT OR DEPOSIT INFORMATION

CITY OF MIAMI BEACH
OFFICE OF THE CITY CLERK

(PLEASE TYPE)

DATE	NAME AND ADDRESS	PURPOSE	AMOUNT	
			Disbursement	Deposit
N/A	N/A	N/A	0.00	0.00
ELECTED OFFICIAL'S INITIALS			TOTAL	TOTAL
			\$0.00	\$0.00