

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Miami Beach for All  
 Name  
 (2) P.O. Box 1701  
 Address (number and street)  
Tallahassee, FL 32302  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1140708]  
 Submitted on:  
 3/3/2017 13:33:04 (eastern)

Check here if address has changed

(3) ID Number: 6

(4) Check appropriate box(es):

- |   |  |
|---|--|
| <p><input type="checkbox"/> Candidate Office Sought: _____</p> <p><input type="checkbox"/> Political Committee (PC)</p> <p><input checked="" type="checkbox"/> Electioneering Communications Org. (ECO)</p> <p><input type="checkbox"/> Party Executive Committee (PTY)</p> <p><input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications)</p> | <p><input checked="" type="checkbox"/> Check here if PC or ECO has disbanded</p> <p><input type="checkbox"/> Check here if PTY has disbanded</p> <p><input type="checkbox"/> Check here if no other IE or EC reports will be filed</p> |
|---|--|

### (5) Report Identifiers

Cover Period: From 2 / 1 / 2017 To 2 / 28 / 2017 Report Type: M02

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      \$ \_\_\_\_\_ , \_\_\_\_\_ , 600 . 00

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

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , 600 . 00

#### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

#### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 600 . 00

#### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 600 . 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 EXPENDITURES**

(1) Name Miami Beach for All

(2) I.D. Number 6

(3) Cover Period 2/1/2017 through 2/28/2017

(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					
2/6/2017 //	Messer Caparello, P.A., 2618 Centennial Place Tallahassee, FL 32308	legal/administr ative fees	MO		\$600.00
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