

FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY

RECEIVED

2009 DEC 31 AM 10:27
 PRISCILLA A. THOMPSON
 CITY CLERK
 CITY OF MIAMI, FL

(1) Francis X. Suarez Campaign Fund
 Name
 (2) 221 Aragon Avenue Suite # 204
 Address (number and street)
Coral Gables, FL 33134-0000
 City, State, Zip Code

Check box if address has changed

(3) I.D. Number: 00000

(4) Check appropriate box(es):

- Candidate (office sought): City Commissioner District 4
 Political Committee Check if PC has DISBANDED
 Committee of Continuous Existence Check if CCE has DISBANDED
 Party Executive Committee Check if no other electioneering communication reports will be filed
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 10/10/2009 To 10/30/2009 Report Type: G3
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$19,421.00
 Loans \$0.00
 Total Monetary \$19,421.00
 In-Kind \$0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$116,084.27
 Transfers to Office Account \$0.00
 Total Monetary \$116,084.27
 (8) Other Distributions \$0.00

(9) TOTAL Monetary Contributions to Date

\$320,563.07

(10) TOTAL Monetary Expenditures to Date

\$309,656.45

(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

Jose A. Riesco

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Signature 

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

Francis X. Suarez

Candidate Chairman (only for PC, PTY & electioneering commun. organization)

Signature 



FIRST AMENDMENT
 TO REPORT FOR PERIOD

FROM 10/10/09 TO 10/30/09

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Francis X. Suarez Campaign Fund (2) I.D. Number 00000
 (3) Cover Period 10/10/2009 - 10/30/2009 (4) Page 0 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
		Type	Occupation				
Nothing to report on this form							

RECEIVED
 2009 DEC 31 AM 10: 27
 PRISCILLA A. THOMPSON
 CITY CLERK
 CITY OF MIAMI, FL

FIRST AMENDMENT
TO REPORT FOR PERIOD
 FROM 10/10/9 TO 10/30/9



CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Francis X. Suarez Campaign Fund (2) I.D. Number 00000
 (3) Cover Period 10/10/2009 - 10/30/2009 (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
10/16/2009	Jimmy John's 125 Miracle Mile Coral Gables, FL 33134-0000	Event Food	MON	ADD	\$ 50.00
000043					
10/27/2009	Marin & Sons Suite #B-21 16155 SW 117 Avenue Miami, FL 33177-0000	CANVASS/SUPPLIES	MON	DEL	\$ 8,535.00
000031					
10/27/2009	Marin & Sons Suite #B-21 16155 SW 117 Avenue Miami, FL 33177-0000	Canvass/Supplies	MON	ADD	\$ 8,035.00
000044					

RECEIVED
 2009 DEC 31 AM 10: 27
 PRISCILLA A. THOMPSON
 CITY CLERK
 CITY OF MIAMI, FL

FIRST AMENDMENT
 TO REPORT FOR PERIOD

FROM 10/10/9 TO 10/30/9

7006 1630 0004 2017 0711

CERTIFIED MAIL

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

THIS FORM APPLIES TO POLITICAL COMMITTEES, COMMITTEES OF CONTINUOUS EXISTENCE AND PARTY EXECUTIVE COMMITTEES ONLY.

(1) Name Francis X. Suarez Campaign Fund (2) I.D. Number 00000
(3) Cover Period 10/10/2009 - 10/30/2009 (4) Page 0 of 0

(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) Related Expenditures	(10) Amendment	(11) Amount	
	Nothing to report on this form					

RECEIVED
2009 DEC 31 AM 10: 27
PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

FIRST AMENDMENT
TO REPORT FOR PERIOD
FROM 10/10/09 TO 10/30/09



CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS

(1) Name Francis X. Suarez Campaign Fund (2) I.D. Number 00000
 (3) Cover Period 10/10/2009 - 10/30/2009 (4) Page 0 of 0

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
	Nothing to report on this form				

RECEIVED
 2009 DEC 31 AM 10:27
 PRISCILLA A. THOMPSON
 CITY CLERK
 CITY OF MIAMI, FL

FIRST AMENDMENT
 TO REPORT FOR PERIOD
 FROM 10/10/9 TO 10/30/9

