

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

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2009 OCT -2 PM 4:58

PRISCILLA A. THOMPSON  
CITY CLERK  
CITY OF MIAMI, FL

(1) Beba Sardiña Mann Campaign  
Name

(2) 1665 SW 23rd St.  
Address (number and street)

Miami, FL 33145

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 00000000

(4) Check appropriate box(es):

Candidate (office sought): Miami Commissioner, District 3

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

**(5) REPORT IDENTIFIERS**

Cover Period: From 4 / 1 / 09 To 6 / 30 / 09 Report Type Q2-09

Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks \$ 12,440.00

Loans \$ 20,000.00

Total Monetary \$ 32,440.00

In-Kind \$ 1,275.00

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures \$ 4,085.66

Transfers to Office Account \$ 0.00

Total Monetary \$ 4,085.66

**(8) Other Distributions**

\$ 0.00

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

\$ 48,575.00

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

\$ 12,032.59

**(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) PAUL D MANN

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

**X** Paul D Mann

Signature

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

(Type name) BEBA SARDINA MANN

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

**X** \_\_\_\_\_

Signature

**SECOND AMENDMENT  
TO REPORT FOR PERIOD  
FROM 4/1/09 TO 6/30/09**

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Beba Sardiña Mann Campaign (2) I.D. Number 0000000

(3) Cover Period 4 / 1 / 09 through 6 / 30 / 09 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type   Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number							
6 / 15 / 09	Clementino	I		CAS		Delete	50.00
000106							
9 / 25 / 09	J. Clemente Vivanco 12942 Ixora Rd. N. Miami, FL 33181	I		CAS		ADD	50.00
000107							
6 / 15 / 09	Paul Mann 1665 SW 23 St Miami, FL 33145	I		CHE		Delete	50.00
000108							
9 / 25 / 09	Paul Mann 1665 SW 23 St Miami, FL 33145	I		CAS		ADD	50.00
000109							
/ /							
/ /							
/ /							
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**SECOND AMENDMENT**

TO REPORT FOR PERIOD REVERSE FOR INSTRUCTIONS AND CODE VALUES

FROM 4/1/9 TO 4/30/9

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