

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) MIGUEL ANGEL GABELA
 Name
 (2) 1701 NW SOUTH RIVER DR
 Address (number and street)
MIAMI FL 33125
 City, State, Zip Code

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Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: CITY OF MIAMI COMMISSIONER DISTRICT 1
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 06 / 01 / 2015 To 06 / 30 / 2015 Report Type: M6

Original Amendment Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . 00

Total Monetary \$ _____ , _____ , _____ . 00

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , 1 , 950 . 00

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

Total Monetary \$ _____ , 1 , 950 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 6 , 850 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 5 , 673 . 12

(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) JOSE R. SANCHEZ-GRONLIER

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X 
 Signature

(Type name) MIGUEL ANGEL GABELA

Candidate Chairperson (only for PC and PTY)

X 
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name MIGUEL ANGEL GABEA (2) I.D. Number _____

(3) Cover Period 06/01/15 through 06/30/15 (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
/ /	NONE						
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name MIGUEL ANGEL GABELA

(2) I.D. Number _____

(3) Cover Period 06 / 01 / 2015 through 06 / 30 / 2015

(4) Page / of /

(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					
06 / 01 / 2015 1	DARK HORSE STRATEGIES 3663 SW 8 ST #205 MIAMI FL 33135	CONSULTING	CAN		\$750.00
06 / 03 / 2015 2	MIRA TV 2920 NW 7 ST MIAMI FL 33125	TV ADVERTISING	CAN		\$300.00
06 / 03 / 2015 3	UNITED STATES POSTAL SERVICE CORAL GABLES BRANCH CORAL GABLES FL 33134	STAMPS	CAN		\$68.00
06 / 08 / 2015 4	DARK HORSE STRATEGIES 3663 SW 8 ST #205 MIAMI FL 33135	PRINTING CARDS	CAN		\$625.00
06 / 12 / 2015 5	UNITED STATES POSTAL SERVICE CORAL GABLES BRANCH CORAL GABLES FL 33134	STAMPS	CAN		\$102.00
06 / 19 / 2015 6	UNITED STATES POSTAL SERVICE CORAL GABLES BRANCH CORAL GABLES FL 33134	STAMPS	CAN		\$105.00
/ /					
/ /					

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CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS

(1) Name MICHELLE ANGELO GABER (2) I.D. Number _____
 (3) Cover Period 0601.15 through 0630.15 (4) Page C of 1

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
//	← JONE →				
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