

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

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PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

(1) MANUEL RICHARDSON
Name

(2) 2093 SW FIRST STREET
Address (number and street)

M IAMI, FL 33135
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): CITY OF MIAMI COMMISSIONER DIST# 1
- 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 09 / 25 / 2010 To 10 / 08 / 2010 Report Type M3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 530.00

Loans \$ 1,494.00

Total Monetary \$ 2,024.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 550.00

Transfers to Office Account \$ 0.00

Total Monetary \$ _____

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 4,204.00

(10) TOTAL Monetary Expenditures To Date

\$ 550.00

(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 electioneering commun.) Treasurer Deputy Treasurer

X _____
Signature

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

(Type name) _____

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

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name MANUEL RICHARDSON CAMPAIGN

(2) I.D. Number _____

(3) Cover Period 09 / 25 / 10 through 10 / 08 / 10

(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 / 05 / 10 003	ONANEY NIEVES 9431 SW 4 ST 107 MIAMI, FL 33174	FIELD WORK			\$150.00
10 / 06 / 10 004	SALVADOR COTES 1601 W 8 AVE HIALEAH, FL 33010	PRINTING TSHIRT			\$200.00
10 / 06 / 10 005	NESTOR MORILLO 2828 NW 17 AVE MIAMI, FL 33142	HEADQUATER CAMPAIGN			\$100.00
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CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name MANUEL RICHARDSON CAMPAIGN

(2) I.D. Number _____

(3) Cover Period 09 / 25 / 10 through 10 / 08 / 10

(4) Page 1 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
/ /	NOTING TO REPORT ON THIS FORM				
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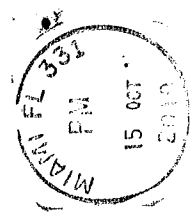
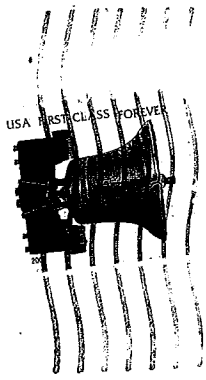
CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MANUEL RICHARDSON CAMPAIGN (2) I.D. Number _____

(3) Cover Period 09 / 25 / 10 through 10 / 08 / 10 (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
09 / 29 / 10	MANUEL RICHARDSON 2442 NW 29 STREET MIAMI, FL 33142	L	INS. AGENT	C			1494
009							
10 / 01 / 10	DE LA ROSA PAINTING 9002 NW 177 ST MIAM FL 3301	I	PAINTER	CK			100
010							
10 / 01 /	VICTOR CABRERA 1830 NW 7 STREET MIAMI FL 33125	I	ACCOUNT ANT	CK			150
011							
10 / 02 / 10	US CLENGING	I	LAUNDRY	CK			25
012							
10 / 05 / 10	MANUEL RICHARDSON 2442 NW 29TH STREET MIAMI, FL 33142	ING	INS. AG	CK			255
012							
/ /							
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2935w 10th Ave
Miami FL 33135

Office of the City Clerk
3500 Pae Americas Dr.
Miami, FL 33133

3313335504