

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

RECEIVED
OFFICE ONLY
NOV 9 PM 12:00
PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL.

(1) Williams A. Armbrister
Name

(2) 3260 Thomas Avenue
Address (number and street)

Miami, Florida 33133
City, State, Zip Code

(3) ID Number: _____

- CHECK IF ADDRESS HAS CHANGED
- (4) Check appropriate box(es):
- Candidate (office sought): City of Miami District 2 Commissioner
- 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 04 / 01 / 2011 To 06 / 30 / 2011 Report Type Q2-11

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>50.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>50.00</u>
In-Kind	\$	<u>0.00</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>30.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>30.00</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 400.00

(10) TOTAL Monetary Expenditures To Date
\$ 238.52

(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) Mamie L. Armbrister

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Mamie L. Armbrister
Signature

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

(Type name) Williams A. Armbrister

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

X Williams A. Armbrister
Signature