

## CAMPAIGN TREASURER'S REPORT SUMMARY

RECEIVED  
 2014 JUL 19 PM 4:54  
 OFFICE OF THE CITY CLERK  
 CITY OF MIAMI, FL  
 OFFICE USE ONLY

(1) Andrino Javier Diaz  
 Name  
 (2) 2264 SW 22nd Ave  
 Address (number and street)  
Miami, FL 33145  
 City, State, Zip Code

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):  
 Candidate Office Sought: City of Miami Commission, Dist-4  
 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 / 14 To 06 / 30 / 14 Report Type: \_\_\_\_\_  
 Original  Amendment  Special Election Report

### (6) Contributions This Report

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

### (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ , \_\_\_\_\_ , 0.00  
 Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , 0.00  
 Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 0.00

### (8) Other Distributions

\$ \_\_\_\_\_ , 1,100.21

### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 2,128.98

### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , 1,100.21

### (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) Andrino Javier Diaz  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X  
 Signature

(Type name) Andrino Javier Diaz  
 Candidate  Chairperson (only for PC and PTY)

X  
 Signature

**CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name Mario J Dim

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 06, 01, 14 through 06, 30, 14

(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					
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Andrés J Díaz RECEIVED (2) I.D. Number \_\_\_\_\_

(3) Cover Period 06 / 01 / 14 through 06 / 30 / 14 (4) Page \_\_\_\_\_ of \_\_\_\_\_

2014 JUL 10 PM 04 54 14  
OFFICE OF THE CITY CLERK  
CITY OF MIAMI, FL

(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
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