

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Bal Harbour Alliance for Leadership, Inc.

Name

(2) 300 W. 41st Street, Suite 214

Address (number and street)

Miami Beach, FL 33140

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

(3) ID Number: 81-2026548

(4) Check appropriate box(es):

Candidate Office Sought: _____

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

Check here if PC or ECO has disbanded

Check here if PTY has disbanded

Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 09 / 01 / 16 To 09 / 30 / 16 Report Type: M9

Original

Amendment

Special Election Report

(6) Contributions This Report

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

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

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

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 300 . 00

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

Total Monetary \$ _____ , _____ , 300 . 00

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 10 , 550 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 8 , 952 . 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) Diane Goodman

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

X *Diane Goodman*
Signature

(Type name) Robert Goodman

Candidate Chairperson (only for PC and PTY)

X *Robert Goodman*
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Bal Harbour Alliance for Leadership, Inc.

(2) I.D. Number 81-2026548

(3) Cover Period 09 / 01 / 16 through 09 / 30 / 16

(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
(6) Sequence Number					
09 / 01 / 16	Greenberg Traurig 333 SE 2nd Avenue Suite 4400 Miami, FL 33131		MON		\$300.00
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