

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

2009 OFFICE USE ONLY
PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

(1) Dufirstson Neree Campaign Fund
Name
(2) 166 NE 54 Street
Address (number and street)
Miami
City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate (office sought): City of Miami Commissioner-District 5
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
 Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 10 / 01 / 2009 To 12 / 11 / 2009 Report Type S1-10
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 1,450.00
 Loans \$ 10,000.00
 Total Monetary \$ 11,450.00
 In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 882.00
 Transfers to Office Account \$ _____
 Total Monetary \$ 882.00

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date
 \$ 11,450.00

(10) TOTAL Monetary Expenditures To Date
 \$ 882.00

(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) Merus Benoit
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X *Merus Benoit*
 Signature

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

(Type name) Dufirstson Neree
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X *Neree*
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Dufirstson Neree Campaign Fund

(2) I.D. Number _____

(3) Cover Period 10 / 01 / 2009 through 12 / 11 / 2009

(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
12 / 03 / 09	City of Miami Office of the City Clerk 3500 Pan American Drive Miami, Florida 33133	Qualifying Fee	CHE		\$682.00
12 / 10 / 09	Campaign Data, Inc. Suite 304 6800 SW 40TH ST Miami, FL 33155	Voter Information	CHE		\$200.00

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 CITY OF MIAMI, FL

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Dufirstson Neree Campaign Fund (2) I.D. Number _____

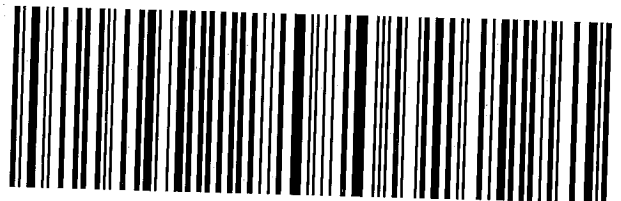
(3) Cover Period 10 / 01 / 2009 through 12 / 11 / 2009 (4) Page 1 of 1

(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
(6) Sequence Number							
12 / 03 / 2009	Neree, Dufirstson 166 NE 54 St Miami, FL 33137	I	Economist	CAS			\$250.00
001							
12 / 03 / 2009	Benoit, Merus 5722 N Miami Ave Miami, FL 33137	I	Photographer	CAS			\$450.00
002							
12 / 08 / 2009	Neree, Dufirstson 166 NE 54 St Miami, FL 33137	I	Economist	CAS			\$250.00
003							
12 / 10 / 2009	Seidman, Marvin 8501 SW 29 St Miami, FL 33155	I	Attorney	CHE			\$500.00
004							
12 / 11 / 2009	Neree, Dufirstson 166 NE 54 St Miami, FL 33137	I	Economist	LOA			\$10000.00
005							
/ /							
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TRK# 8704 6271 1276
0200
11 DEC 11 21:28
33133
FL-US
MIA

3C JDMA



12:14
554
7
FZ

FedEx Express US Airbill
8704 6271 1276
0200

1 From
Date 12-11-09
Sender's Name Du Neree for Miami Commission
Company Du Neree for Miami Commission
Address 166 NE 54 Street
City Miami State FL ZIP 33137

2 Your internal Billing Reference

3 To Recipient's Name City Clerk
Company City of Miami
Address 3500 Pan American Drive
Address Office of The Clerk
City Miami State FL ZIP 33133

4a Express Package Service
 FedEx Priority Overnight
 FedEx 2Day
 FedEx Express Saver

4b Express Freight Service
 FedEx 1Day Freight
 FedEx 2Day Freight
 FedEx 3Day Freight

5 Packaging
 FedEx Envelope
 FedEx Pak
 FedEx Box
 FedEx Tube
 Other

6 Special Handling and Delivery Signature Options
 SATURDAY DELIVERY
 No Signature Required
 Direct Signature
 Indirect Signature

7 Payment Bill to:
 Sender
 Recipient
 Third Party
 Credit Card
 Cash/Check

Insert airbill here

fedex.com 1.800.GoFedEx 1.800.463.3339

fedex.com 1.800.GoFedEx 1.800.463.3339



8704 6271 1276

554