

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

RECEIVED
2009 SEP 18 PM 4:39
CITY CLERK'S OFFICE

(1) MATTI HERRERA BOWER
Name
(2) 1442 JEFFERSON AVE
Address (number and street)
MIAMI BEACH, FL 33139
City, State, Zip Code

OFFICE USE ONLY

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):
 Candidate (office sought): MAYOR OF CITY OF MIAMI BEACH
 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 07 / 01 / 09 To 09 / 11 / 09 Report Type F1-09
 Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 5500.00
 Loans \$ 0
 Total Monetary \$ 5500.00
 In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 1360.00
 Transfers to Office Account \$ 0
 Total Monetary \$ 1360.00

(8) Other Distributions
 \$ _____

(9) TOTAL Monetary Contributions To Date
 \$ 5500.00

(10) TOTAL Monetary Expenditures To Date
 \$ 1360.00

(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) MARIA BEATRIZ GUTIERREZ
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer
X [Signature]
 Signature

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

(Type name) MATTI HERRERA BOWER
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)
X [Signature]
 Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name MATT HERRERA BOWER (2) I.D. Number _____

(3) Cover Period 07 / 01 / 2009 through 09 / 11 / 2009 (4) Page 1 of _____

(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		Type	Occupation				
07, 06, 09 01	SOUTH BEACH BOUTIQUE REALTY 407 LINCOLN RD SUITE 2E MIAMI BEACH, FL 33139	B	REALTOR/ REAL ESTATE	CHE			500.00
07, 20, 09 02	THE PEEBLES CORP 550 BILTMORE WAY SUITE 970 CORAL GABLES, FL 33134	B	REAL ESTATE DEVELOPMENT	CHE			500.00
07, 20, 09 03	J.L. BERKOWITZ TRUST 2665 S. BAYSHORE DR SUITE 1200 COCONUT GROVE, FL 33133		TRUST BUSS	CHE			500.00
07, 20, 09 04	DANIELAND DEPT INC 2665 S BAYSHORE DR SUITE 1200 COCONUT GROVE, FL 33133	B	SHOPPING CENTER	CHE			500.00
07, 20, 09 05	MIAMI BEACH FIREFIGHTERS UNION LOCAL 1510 P.O. Box 403518 MB, FL 33140	B	UNION	CHE			500.00
07, 20, 09 06	R. DONAHUE PEEBLES 550 BILTMORE WAY SUITE 970 CORAL GABLES, FL 33134	I	REAL ESTATE INVESTOR	CHE			500.00
07, 20, 09 07	BATH CLUB ENTERTAINMENT 550 BILTMORE WAY SUITE 970 CORAL GABLES, FL 33134	B	BEACH CLUB	CHE			500.00
07, 20, 09 08	BERKOWITZ DEV GROUP 2665 S. BAYSHORE DR SUITE 1200 COCONUT GROVE, FL 33133	B	RETAIL DEVELOPMENT	CHE			500.00

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name MATTI HERRERA BOWEN (2) I.D. Number _____

(3) Cover Period 07 / 01 / 2009 through 09 / 11 / 2009 (4) Page 2 of _____

(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		Type	Occupation	Type	Description		Amount
07, 20, 09 09	BERKINLEY CORP. 2665 S. BAYSHORE DR SUITE 1200 COCONUT GROVE, FL 33133	B		CHE			500.00
07, 20, 09 10	PATHAM, L. 1511 W 27 ST M.B. FL 33134	I	HOUSEWIFE	CHE			500.00
07, 20, 09 11	KENDALLGATE PROP, INC 2665 S. BAYSHORE DR SUITE 1200 COCONUT GROVE, FL 33133	B	REAL ESTATE CORP.	CHE			500.00
1 / 1							
1 / 1							
1 / 1							
1 / 1							
1 / 1							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name MATT HERRERA BOWER (2) I.D. Number _____

(3) Cover Period 07/01/2009 through 09/11/2009 (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
(6) Sequence Number					
09/08/09	CITY OF MIAMI BEACH 1720 CONVENTION CTR DR MIAMI BEACH, FL 33139	QUALIFYING	MON		1360.00
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