

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

RECEIVED  
 OFFICE USE ONLY  
 2009 OCT -2 PM 1:19  
 CITY CLERK'S OFFICE

(1) Sherry Roberts  
 Name

(2) 100 Lincoln Road Penthouse Two  
 Address (number and street)

Miami Beach, FL 33139-0000  
 City, State, Zip Code

Check box if address has changed

(3) I.D. Number: 00000

(4) Check appropriate box(es):

- Candidate (office sought): Miami Beach Commissioner Group 2
- 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 09/12/2009 To 09/25/2009 Report Type: SG2

Original  Amendment  Special Election Report  Independent Expenditure 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 \$0.00

**(9) TOTAL Monetary Contributions to Date**

90,536.87 ~~\$0.00~~

**(10) TOTAL Monetary Expenditures to Date**

56,454.61 ~~\$0.00~~

**(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

Raquel Levy

Individual (only for electioneering commun.)  Treasurer  Deputy Treasurer

Signature Raquel Levy

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

Sherry Roberts

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

Signature Sherry Roberts

# CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Sherry Roberts (2) I.D. Number 00000

(3) Cover Period 09/12/2009 - 09/25/2009 (4) Page 0 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation				
	Nothing to report on this form						

## CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name Sherry Roberts (2) I.D. Number 00000

(3) Cover Period 09/12/2009 - 09/25/2009 (4) Page 0 of 0

(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
	<b>Nothing to report on this form</b>				

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## CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

THIS FORM APPLIES TO POLITICAL COMMITTEES, COMMITTEES OF CONTINUOUS EXISTENCE AND PARTY EXECUTIVE COMMITTEES ONLY.

(1) Name Sherry Roberts (2) I.D. Number 00000  
 (3) Cover Period 09/12/2009 - 09/25/2009 (4) Page 0 of 0

(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) Related Expenditures	(10) Amendment	(11) Amount
	<b>Nothing to report on this form</b>				

# CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS

(1) Name Sherry Roberts (2) I.D. Number 00000

(3) Cover Period 09/12/2009 - 09/25/2009 (4) Page 0 of 0

(5) Date	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
(6) Sequence Number					
	Nothing to report on this form				