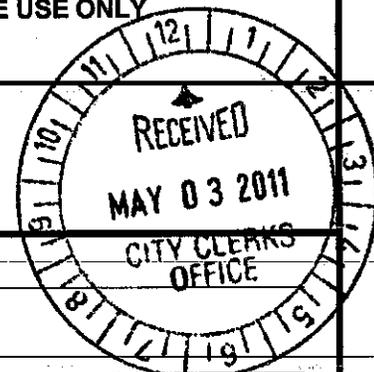


**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Michael A. Etienne
Name

OFFICE USE ONLY



(2) 111 North East 1st Street, Suite 324
Address (number and street)

Miami, Florida 33132

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): _____

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 04 / 16 / 2011 To 05 / 05 / 2011 Report Type G4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ _____ 0.00

Loans \$ _____ 511.34

Total Monetary \$ _____ 511.34

In-Kind \$ _____ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ _____ 781.54

Transfers to Office Account \$ _____ 0.00

Total Monetary \$ _____ 781.54

(8) Other Distributions \$ _____ 0.00

(9) TOTAL Monetary Contributions To Date
\$ _____ 3,711.54

(10) TOTAL Monetary Expenditures To Date
\$ _____ 3,711.54

(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) Michael A. Etienne

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X

Signature

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

(Type name) Michael A. Etienne

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

X

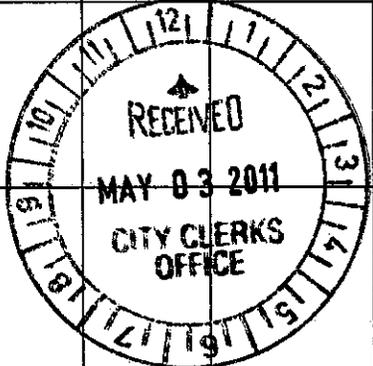
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Michael A. Etienne (2) I.D. Number _____

(3) Cover Period 04 / 16 / 2011 through 05 / 05 / 2011 (4) Page 1 of 1

(5) Date	(6) Sequence Number	(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
			Type	Occupation				
04 / 19 / 2011	1	Etienne, Michael 13655 N.E. 10th Avenue, Unit 107, North Miami, FL 33161	I	Attorney	LOA			327.98
05 / 03 / 2011	2	Etienne, Michael 13655 N.E. 10th Avenue, Unit 107, North Miami, FL 33161	I	Lawyer	LOA			183.36
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael A. Etienne (2) I.D. Number _____
 (3) Cover Period 04 / 16 / 2011 through 05 / 05 / 2011 (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					
04 / 19 / 11	Image Plus Graphics, 1440 N.E. 131st Street, North Miami, FL 33161	Campaign Mailers	MON		\$327.98
1					
05 / 03 / 11	Image Plus Graphics, 1440 N.E. 131st Street, North Miami, FL 33161	Campaign Mailers	MON		\$413.56
2					
05 / 03 / 11	Etienne, Michael 13655 North East 10th Avenue, Unit 107, North Miami, FL 33161	Refund	REF		\$40.00
3					
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