

**MONTHLY REPORT OF GROSS REVENUES**

MONTH OF: \_\_\_\_\_ YEAR: \_\_\_\_\_

FROM: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TO: MS. BRENDA ELLIS  
MIAMI-DADE AVIATION DEPT.  
FINANCE DIVISION  
P.O. BOX 526624  
MIAMI, FLORIDA 33152-6624

Email: [bellis@miami-airport.com](mailto:bellis@miami-airport.com)  
Phone: 305-876-8497 Fax# 305-876-7792

**FED EX/UPS/DHL ADDRESS:**  
4200 NW 36<sup>TH</sup> STREET  
BLDG. 5A, STE. 300  
MIAMI, FLORIDA 33166

**LIST OF CUSTOMERS**

**AMOUNT**

1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____
5)	_____	_____
6)	_____	_____
7)	_____	_____
8)	_____	_____
9)	_____	_____
10)	_____	_____
11)	_____	_____
12)	_____	_____
13)	_____	_____
14)	_____	_____

List additional customers on an attached sheet

**TOTAL MONTHLY GROSS REVENUES:** \$ \_\_\_\_\_

**COMPUTATION OF PERCENTAGE FEE DUE:**

7% OF MONTHLY GROSS REVENUES \$ \_\_\_\_\_

PAYMENT INCLUDED IN CK # \_\_\_\_\_ AMT: \_\_\_\_\_ DATED: \_\_\_\_\_

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE