| | CAMPAIGN TREASURE | R'S REPORT SUMMARY | | | | | | |
|-------------------|---|--|--|--|--|--|--|--|
| (1) | Brevard Taxpayers for Financial Respo | onsibility OFFICE USE ONLY ONLINE SUBMISSION | | | | | | |
| (0) | Name | [1172390] | | | | | | |
| (2) | 419 N. Washington Avenue | Submitted on: | | | | | | |
| | Address (number and street) Titusville, FL 32796 | 9/12/2018 14:15:21 (eastern) | | | | | | |
| | City, State, Zip Code | | | | | | | |
| | Check here if address has changed | (3) ID Number: 756 | | | | | | |
| (4) | | (6) 15 (1011)5011 | | | | | | |
| (4) | Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed | | | | | | | |
| | (5) Report | Identifiers | | | | | | |
| Cove | er Period: From 9 / 1 / 2018 To | 9 / 14 / 2018 Report Type: <u>G2</u> | | | | | | |
| X O | riginal Amendment Spo | ecial Election Report | | | | | | |
| (6) | Contributions This Report | (7) Expenditures This Report | | | | | | |
| Cash | n & Checks \$, , , 000 | Monetary | | | | | | |
| Loar | s \$,, <u>0</u> . <u>00</u> | Transfers to Office Account \$, , , 0 . 00 | | | | | | |
| Total Monetary \$ | | Total Monetary \$, , _12 . 00 | | | | | | |
| In-Ki | nd \$,, <u>0</u> . <u>00</u> | | | | | | | |
| | | (8) Other Distributions \$, , 000_ | | | | | | |
| (9) | TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date | | | | | | |
| | \$ | \$, <u>5</u> , <u>300</u> . <u>00</u> | | | | | | |
| Ιc | | tification on to falsify a public record (ss. 839.13, F.S.) ect. and complete: | | | | | | |
| | | | | | | | | |
| | /pe name) Individual (only for IE | (Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY) | | | | | | |
| Х | | X | | | | | | |
| | gnature | Signature | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name | Brevard Taxpayers for Financial Responsibi (2) y.D. Number 756 | | | | | | | | |
|---------------------------|--|------------|---|----------------------|--|-----------|---|--|--|
| | 9/1/2018 | | 9 | /14/2018 | | | | | |
| (3) Cover Perio | od// | thro | ough | <i>l l</i> | (4) Pag | e | of | | |
| (5) Date | (7) Full Name | | (8) | (9) | (10) | (11) | (12) | | |
| (6) Sequence Number | (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Co Type | ontributor Occupation | Contribution Type | In-kind Description | Amendment | Amount | | |
| | The second secon | | According to a supplementary of the control of the | 0.010 | Secretaria de consecución de la compressión de l | | yes a species of english species on a species | | |
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name | Brevard | Taxpayers | for F | rinancial | Responsibility | (2) I.D. Numl | oer | 7 | 56 |
|--------------|---------|-----------|-------|-----------|----------------|---------------|-----|----|----|
| | 9/ | 1/2018 | | 9/14 | /2018 | | | | |
| (3) Cover Pe | riod | 1 1 | thro | uah / | 1 | (4) Page | 1 | of | 1 |

| (5) | (7) | (8) | (9) | (10) | (11) |
|---------------------------|---|---|---------------------|-----------|---------|
| (6) Sequence Number | Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Purpose (add office sought if contribution to a candidate) | Expenditure Type | Amendment | Amount |
| 9/11/2018 | Brevard Citizens for Good Gove, 5978 Newbury Circle Melbourne, FL 32940 | donation | МО | | \$12.00 |
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