CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Resiliency Coalition	OFFICE USE ONLY						
( · /	Name	ONLINE SUBMISSION						
(2)	3816 Hollywood Blvd Suite 203	[1201875]						
	Address (number and street)	Submitted on: 3/10/2020 11:38:15 (eastern)						
	Hollywood, FL 33021	3/10/2020 11·30·13 (cascelli)						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:565						
(4)	Check appropriate box(es):							
	Candidate Office Sought:							
	▼ Political Committee (PC)      □ Floation across (Section 2 Committee (PC))	Cheek have if DC as FCO has disheaded						
	<ul><li>☐ Electioneering Communications Org. (ECO)</li><li>☐ Party Executive Committee (PTY)</li></ul>	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	Identifiers						
Cove	er Period: From $\frac{2}{2}$ / $\frac{1}{2}$ / $\frac{2020}{20}$ To							
		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casł	n & Checks \$ , , 000	Monetary						
Loar	s \$,, <u>0</u> .00	Transfers to						
		Office Account \$ , , 0 . 00						
Tota	I Monetary \$ , , 0 . 00							
	·	Total Monetary \$ , 3 ,400 . 00						
In-Ki	nd \$ , , 0.00							
		(8) Other Distributions						
		\$, ,, ,000						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>26</u> , <u>000</u> . <u>00</u>	\$, _ 3 , _40000						
	(11) Cert							
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:								
_(T	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		x						
Sig	gnature	Signature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	on	(2) I.D. Number							
	2/1/2020		2	/29/2020					
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	e	of		
1000			14400		- 40 00 00700				
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)			_					
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	N		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
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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	Resili	ency (	Coalit	alition			 (2) I.D. Nur	nber	565		
	2	2/1/20	20		2/29/2	020	*				
(3) Cover Pe	riod	I	1	through	1	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
2/13/2020	HCT Certified Public Accountan, 3816 Hollywood Blvd, Suite 203 Hollywood, Fl 33021-	accounting services feb. 2020	MO		\$200.00
2/13/2020	HCT Certified Public Accountan, HCT Certified Public 3816 Hollywood Blvd, Suite 203 Hollywood, Fl 33021-	accounting services aug. 2019 to jan. 2020	МО		\$1,200.00
2/13/2020	HCT Certified Public Accountan, HCT Certified Public HCT Public 3816 Hollywood Blvd, Suite 203 Hollywood, Fl 33021-	establishment of the pac fee	МО		\$2,000.00
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