

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Broward First
 Name
 (2) 10850 Wiles Road
 Address (number and street)
Coral Springs, FL 33076
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1191466]

Submitted on:
 9/5/2019 12:39:32 (eastern)

Check here if address has changed

(3) ID Number: 566

(4) Check appropriate box(es):

- Candidate Office Sought: _____
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 7 / 1 / 2019 To 7 / 31 / 2019 Report Type: M7

Original Amendment Special Election 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

\$ _____ , 43 , 650 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 5 , 000 . 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:

(Type name) _____

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____

Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Broward First (2) I.D. Number 566
 7/1/2019 through 7/31/2019
 (3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number						
7/29/2019 / /	LUPARI, BROOKE 1001 BROKEN SOUND PKWY NW SUITE C BOCA RATON, FL 33487	I technology manager	CH		Delete	\$500.00
1						
7/29/2019 / /	STRAX INTELLIGENCE GROUP, 1001 BROKEN SOUND PKWY NW SUITE C BOCA RATON, FL 33487	I technology company	CH		Add	\$500.00
2						
7/29/2019 / /	CASTALINI, BOB PO BOX 27329 GREENVILLE, SC 29616	I ceo	CH		Delete	\$5,000.00
3						
7/29/2019 / /	CIRCLE CREEK HOLDING COMPANY, PO BOX 27329 GREENVILLE, SC 29616	I holdings company	CH		Add	\$5,000.00
4						
/ /						
/ /						
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/ /						
/ /						
/ /						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Broward First

(2) I.D. Number 566

(3) Cover Period 7/1/2019 through 7/31/2019

(4) Page 1 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
(6) Sequence Number					
/ /					
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