CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Hillsboro Beach Committee for Better							
Name	ONLINE SUBMISSION [1252092]						
(2) 265 South Federal Highway; Suite 236	Submitted on:						
Address (number and street)	12/6/2021 09:09:30 (eastern)						
Deerfield Beach, FL 33441-4161 City, State, Zip Code							
Check here if address has changed	(3) ID Number: 615						
(4) Check appropriate box(es):							
Candidate Office Sought:							
X Political Committee (PC)							
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	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							
Cover Period: From <u>11</u> / <u>1</u> / <u>2021</u> To	0 <u>11</u> / <u>30</u> / <u>2021</u> Report Type: <u>M11</u>						
⊠ Original	pecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$ , , , 0 . 00	Expenditures \$,, <u>3</u> .00						
Loans \$,,0.00	Transfers to						
	Office Account \$ , , 0 . 00						
Total Monetary \$ , , 0.00							
·	Total Monetary \$, , 3.00						
In-Kind \$,, <u>0</u> . <u>00</u>							
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>9</u> , <u>350</u> . <u>00</u>	<b>\$</b> , <u>5</u> _, <u>320</u> . <u>85</u>						
(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) (Type name)							
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)						
or electioneering comm.)							
x	x						
Signature	Signature						

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name							515
	11/1/2021		1	1/30/2021		_	
(3) Cover Perio	od / /	thro	ough	<i>ll</i>	(4) Pag	e	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount
1 1							
1 1							
1 1							
1 1							
1 1	-						
1 1							
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name <u>Hillsboro Beach Committee for Better Government</u> (2) I.D. Number 615								
(3) Cover Period	11/1/2021 d/through_	11/30/2021 /(4	4) Page <u>1</u>	of	1			
(5) Date (6) Sequence Number	(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			
11/30/2021	TD Bank, 3600 N Federal Hwy Lighthouse Point, FL 33064	bank fee	МО		\$3.00			
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