FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) (PAC) Fiscal Responsibility Now
Name

(2) 17660 NW 89 Avenue
Address (number and street)

Hialeah, FL 33018
City, State, Zip Code

OFFICE USE ONLY

ONLINE SUBMISSION
[1057245]

Submitted on:
12/3/2013 20:27:13 (eastern)

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 1038

(4) Check appropriate box(es):

☐ Candidate (office sought):
☒ Political Committee
☐ Committee of Continuous Existence
☐ Party Executive Committee
☐ Electioneering Communication

☐ CHECK IF PC HAS DISBANDED
☐ CHECK IF CCE HAS DISBANDED
☐ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 12/1/2013 / / To 12/31/2013 / / Report Type M12-1

☒ Original ☐ Amendment ☐ Special Election Report ☐ Independent Expenditure 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	$ 650.00
Transfers to Office Account	$ 0.00
Total Monetary	$ 650.00

(8) Other Distributions

$ 0.00

(9) TOTAL Monetary Contributions To Date

$ 237,800.00

(10) TOTAL Monetary Expenditures To Date

$ 237,444.24

(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 electioneering commun.) ☐ Treasurer ☐ Deputy Treasurer

X

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name)

☐ Candidate ☐ Chairperson (only for PC, PTY & electioneering commun. organization)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (PAC) Fiscal Responsibility Now **(2) I.D. Number** 1038

(3) Cover Period 12/1/2013 / / through 12/31/2013 / / **(4) Page** 1 of 0

(5) Date / (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Contributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name (PAC) Fiscal Responsibility Now **(2) I.D. Number** 1038

(3) Cover Period 12/1/2013 / / through 12/31/2013 / / **(4) Page** 1 **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
12/3/2013 / / 1	Miami Dade County, 2700 NW 87 Ave Miami, FL 33172	penalty	MO		$650.00
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DS-DE 14 (Rev. 08/03)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES