CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	(PAC) Citizens For A Healthy Miami-Da	ade OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	c/o Morrison, Brown, Argiz & Farra, LI								
	Address (number and street)	Submitted on:							
	Miami, FL 33131	1/9/2014 17:09:56 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:1258							
(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							
Cove	er Period: From 11 / 1 / 2013 To	11 / 30 / 2013 Report Type: M11-1							
По		ecial Election Report							
		ı							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , , 0 . 00	Monetary							
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , , 000	Total Monetary \$, -1 , 656 . 25							
In-Ki	ind \$,,,000	,, ,, ,							
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$ <u>2</u> , <u>143</u> , <u>976</u> . <u>00</u>	\$ <u>2</u> , <u>054</u> , <u>294</u> . <u>27</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:									
_(T	ype name)	_(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		×							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(PAC) Citizens For	A He	althy Mian	ni-Dade (2) I.D. Numbe	er1	258	
	11 /1 /0010		-	1 /20 /0012		. 1		
(3) Cover Period / through / / (4) Page¹ of _0								
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
1								
1 1								
1 1								
1 1								
f f								
/ /								
/ /								
1 1								

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	(PAC)	Citizen	s For	A Health	y Miami	-Dade	 (2) I.D. Nur	nber	1	L258	
		11/1/203	13		11/30/	2013	-				
(3) Cover Per	riod	I	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
11/6/2013	Party Cateres, Inc., 1150 NW 58 Ave. Margate, FL 33063	event catering	МО	Delete	\$1,656.25
1					
11/6/2013	Party Cateres, Inc., 1150 NW 58 Ave. Margate, FL 33063	event catering	MO	Add	\$0.00
2					
//					
_//					
_/ /					
3 2					
//					
DS-DE 14 (Rev.	4442 \				