CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) (PAC) Community Advocates for Librar								
Name (2) P.O. Box 557832	ONLINE SUBMISSION [1077527]							
(2) P.O. Box 557832 Address (number and street)	Submitted on:							
Miami, FL 33255	10/1/2014 22:03:49 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 1287							
(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 <u>8</u> / <u>30</u> / <u>2014</u> To	9/12_/2014 Report Type:14G2							
Original 🛛 Amendment 🗌 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , , 00	Expenditures \$,,, 000							
Loans \$,,0.00	Transfers to							
	Office Account \$, , 0 . 00							
Total Monetary \$,,,0 00								
	Total Monetary \$,,,0 . 00							
In-Kind \$,, 00								
	(8) Other Distributions \$ 0.00							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>2</u> , <u>085</u> . <u>00</u>	\$,,,64							
(11) Cer	1							
(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 or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
<u>X</u>	<u>X</u>							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name(PAC) Community Advocates for Libraries in (2) J.P. Number1287								
(3) Cover Peri	8/30/2014 od//	thro	9 Dugh	/12/2014 / /	(4) Pag	e 1	of ⁰		
(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	Туре	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 (PAC) Community Advocates for Libraries in Miam(2) (PAC) Community Advocates for Libraries in Miam(2) (PAC) 1287								
(3) Cover Perio	8/30/2014 9/1 d / / through	2/2014 / (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			
9/8/2014	Munias, Mercedes 9765 SW 92 Ter Miami, FL 33176	reimbursement for a cash donation that exceeded \$50 max on 6/30/14.	RM	Delete	\$40.00			
9/8/2014 // 2	Munias, Mercedes 9765 SW 92 Ter Miami, FL 33176	a refund for a cash donation that exceeded \$50 max on 6/30/14.	RE	Add	\$40.00			
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