	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	(PAC) Miami-Dade County Working With								
	Name	ONLINE SUBMISSION [1076108]							
(2)	900 S. Pine Island Road	Submitted on:							
	Address (number and street)	9/13/2014 16:21:13 (eastern)							
	Plantation, FL 33324								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 1294							
(4)	Check appropriate box(es):								
	Candidate Office Sought:								
	<ul><li>☑ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded							
	☐ Party Executive Committee (PTY)	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							
Cove		9 / 12 / 2014 Report Type: 14G2							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(0)	Tomas and the report	Monetary							
Cast	n & Checks \$ , , 0 . 00	Expenditures \$ , 1,000.00							
Ouoi	7 d 61100110								
Loar	ns \$,,,0.00	Transfers to							
		Office Account \$ , , 0 . 00							
Tota	I Monetary \$,,								
		Total Monetary \$ ,1 , 000 . 00							
In-Ki	nd \$,,,0 . 00								
		(8) Other Distributions							
		\$ , , <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date (10) TOTAL Monetary Expenditures To Date									
<b>\</b>	\$, 184 , 723 . 02	\$, 11 , 000 . 00							
	<b>1</b> ,	tification							
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)							
X		X							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(PAC) Miami-Dade C			2) I.D. Numbe	er <u>1</u>	294
(3) Cover Perio	8/30/2014 od///	through	9/12/2014 _ / /	(4) Pag	ge <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1						
1 1						
1 1						
1 1						
1 1						
1 1						
1 1						
1 1						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	(PAC)	Miami-D	ade	County	Working	With	You	PAC	(2) I.D. Nun	nber	1	294	
		8/30/201	14		9/12	2/2014							
(3) Cover Pe	riod	I	1	throu	ah /	r.	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
9/6/2014	Florida Democratic Party, 214 S Borough St	event	МО		\$1,000.00
1	Tallahassee, FL 32301				
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//					
//					
//					
//					
//					
DS-DE 14 (Rev					