CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Miami-Dade Republican Lawyers Commit								
Name	ONLINE SUBMISSION [1231227]							
(2) 18851 NE 29 Avenue; Suite 303	Submitted on:							
Address (number and street) Aventura, FL 33180	9/18/2020 12:46:18 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 1411							
(4) Check appropriate box(es):								
 Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) 								
(5) Report Identifiers								
Cover Period: From <u>8</u> / <u>29</u> / <u>2020</u> To	9 / <u>11</u> / <u>2020</u> Report Type: <u>20G2</u>							
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$, , , 0 . 00	Monetary Expenditures \$, , , 5 . 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$							
Total Monetary \$	Total Monetary \$, , , , 00							
	(8) Other Distributions							
	\$,,,0.							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>22</u> , <u>425</u> . <u>00</u>	\$, <u>22</u> , <u>314</u> . <u>16</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 or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
X	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	<u>Miami-Dade Republican Lawyers Committee</u> (2) I.D. Number <u>1411</u>							
	8/29/2020		9	/11/2020				
(3) Cover Per	iod / /	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	Туре	15 55 51 1 1 4 5 7 1 1 4 5 7 1 1 4 5 7 1 5 1 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5	Туре	Description	Amendment	Amount	
1 1								
1 1								
/ /								
1 1								
1 1								
1 1								
1 1								
/ /								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Mia	CAMPAIGN TREASURER' mi-Dade Republican Lawye	ers Committee) EXPENDIT 2) I.D. Number	1411	
(3) Cover Period	8/29/2020 // through_	9/11/2020 //	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
	FIRST AMERICAN BANK, 2295 GALIANO ST CORAL GABLES, FL 33134	bank fees	МО		\$5.00
_/ /					
_ / /					
11					
_/ /					
_/ /					
11					
11					

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