CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Miami-Dade Republican Lawyers Committ	ee OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	18851 NE 29 Avenue; Suite 303	[1244152]							
	Address (number and street)	Submitted on:							
	Aventura, FL 33180	3/5/2021 10:59:05 (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) Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed								
	(5) Report	Identifiers							
Cove	er Period: From $\underline{2}$ / $\underline{1}$ / $\underline{2021}$ To	2 / 28 / 2021 Report Type: 21M02							
X O	riginal Amendment Spe	cial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$, , ,000	Monetary							
Loar		Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$,,	Total Monetary \$, , _10 . 00							
In-Ki	nd \$, , 0 . <u>00</u>								
		(8) Other Distributions \$, , 000_							
(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>359</u> . <u>16</u>							
<u>(T)</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) Individual (only for IE								
X		X							
Sic	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Miami-Dade Republi	can L	awyers Com	mittee (2) I.D. Numbe	er <u> </u>	411
	2/1/2021		2	/28/2021			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	e	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
Tambol	Only, Oldie, Zip Oodo	1,700	оссирации	1,00	Becomption		3 timodric
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1 1							
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1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Miami-	Dade F	Republ	ican Lawye:	rs Comm	ittee	 (2) I.D. Num	nber	1	1411	200
		2/1/20	21		2/28/2	021					
(3) Cover Pe	riod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
2/26/2021	FIRST AMERICAN BANK, 540 BILTMORE WAY	bank fee	MO		\$10.00
1	CORAL GABLES, Fl 33134-				
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