CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Miami-Dade Republican Lawyers Commit								
Name	ONLINE SUBMISSION [1246145]							
(2) 18851 NE 29 Avenue; Suite 303	Submitted on:							
Address (number and street) Aventura, FL 33180	6/2/2021 16:23:18 (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) 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								
Cover Period: From <u>5</u> / <u>1</u> / <u>2021</u> To	5/ 31/ 2021 Report Type:21M05							
☐ Original	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$, , , 0 . 00	Monetary Expenditures \$, , <u>10</u> . <u>00</u>							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$							
Total Monetary \$	Total Monetary \$, , <u>10</u> . <u>00</u>							
	(8) Other Distributions							
	\$, <u>0</u> . <u>00</u>							
(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>389</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							

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Miami-Dade Republi	Miami-Dade Republican Lawyers Committee (2) I.D. Number 1411						
	5/1/2021		5	/31/2021				
(3) Cover Pe	eriod / /	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	ALCONTRACTOR AND AND A ACCOUNTS	Туре	Description	Amendment	Amount	
1 1				6.011				
1 1								
1 1								
1 1								
1 1								
1 1								
1 1								
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Mian	CAMPAIGN TREASURER' mi-Dade Republican Lawye		EXPENDIT 2) I.D. Number	1411	
(3) Cover Period	5/1/2021 <i>I/</i> through_	5/31/2021 //(4	l) 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, 540 BILTMORE WAY CORAL GABLES, FL 33134	bank fee	МО		\$10.00
_/ /					
_/ /					
_/ /					
//					
//					

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES