CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) (PAC) North Bay Village Voice Name (2) 7520 Hispanola Avenue Address (number and street) North Bay Village, FL 33141 City, State, Zip Code Check here if address has changed Check appropriate box(es): Candidate Office Sought: Yellotical Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) OFFICE USE ONLY ONLINE SUBMISSION [1080067] Submitted on: 10/24/2014 11:38:30 (eastern) OFFICE USE ONLY ONLINE SUBMISSION [1080067] Submitted on: 10/24/2014 11:38:30 (eastern) Check here if PC or ECO has disbanded 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 10 / 11 / 2014 To 10 / 17 / 2014 Report Type: 14G6 ☑ Original ☐ Amendment ☐ Special Election Report								
(6) Contributions Cash & Checks Loans Total Monetary In-Kind	\$	(7) Expenditures This Report Monetary Expenditures \$,, 123 . 26 Transfers to Office Account \$,,,						
\$								
(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								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (PAC) North Bay Village Voice (2) I.D. Number								
(3) Cover Period	10/11/2014	through	1 /	(4) Pag	je <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		
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1 1								
1 1								
j j								
J I								
1 1								
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1 1								

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	(PAC)	North	Bay '	Village Vo:	ice		 (2) I.D. Nun	nber	1	L412	
		10/11/	2014		10/17/	2014					
(3) Cover Per	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
10/15/2014	BANK OF CORAL GABLES, 2295 Galiano St Coral Gables, Fl 33134-	bank fee	MO		\$123.26
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