CAMPAIGN TREASURER'S REPORT SUMMARY						
(1)	Miami-Dade Residents First	OFFICE USE ONLY				
` ,	Name	ONLINE SUBMISSION				
(2)	2121 Ponce de Leon Blvd.; Suite 1100	[1171758]				
	Address (number and street)	Submitted on:				
	Coral Gables, FL 33134	9/7/2018 12:49:45 (eastern)				
	City, State, Zip Code					
	Check here if address has changed	(3) ID Number:1415				
(4)	Check appropriate box(es):					
	Candidate Office Sought:					
	▼ Political Committee (PC)	Check have if BO as EOO has disharded				
		☐ 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				
	individual making electioneering communications)					
	(E) D (
_		Identifiers				
Cove	er Period: From $8 / 24 / 2018$ To	8 / 31 / 2018 Report Type: 18G1				
<u>X</u> 0	riginal Amendment Spe	ecial Election Report				
(6)	Contributions This Report	(7) Expenditures This Report				
Cash	n & Checks \$,5 , _00000	Monetary				
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00				
Tota	I Monetary \$, 5 , 000 . 00					
		Total Monetary \$, , 0 . 00				
In-Ki	nd \$,,,0 . 00					
		(8) Other Distributions				
		\$, <u> </u>				
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
	\$ <u>4</u> , 488, 507. 00	\$4, 480, 044. 88_				
		ification				
It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)						
Ιc	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				
Sig	gnature	Signature				

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Miami-Dade Residen	de Residents First				(2) I.D. Number			
	8/24/2018		8	/31/2018					
(3) Cover Perio	od / /	thro	ugh	<i>l l</i>	(4) Pag	e <u> </u>	of		
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8) entributor	(9) Contribution	(10) In-kind	(11)	(12)		
Number	City, State, Zip Code PDS Development,		Occupation real	Type CH	Description	Amendment	Amount \$5,000.0		
8/28/2018 / /	LLC, 1 Fisher Island Drive Fisher Island, FL 33109		estate developer						
1 1									
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	s u			MIZED EXPENDITURES (2) I.D. Number 1415		
(3) Cover Period	8/24/2018 /through_	8/31/2018 //(4	1) Page <u>1</u>	of _	0	
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount	
//						

Number	City, State, Zip Code	candidate)	туре	Amendment	Amount
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