CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Better Miami	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1150070]							
(2) <u>3900 SW 26th Street</u>	Submitted on:							
Address (number and street) West Park, FL 33023	3/4/2018 06:56:01 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 1476							
(4) Check appropriate box(es):								
Candidate Office Sought:								
 Political Committee (PC) Electioneering Communications Org. (ECO) 	Check here if PC or ECO has disbanded							
Party Executive Committee (PTY)	Check here if PTY has disbanded							
Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed							
(5) Report Identifiers								
Cover Period: From <u>2</u> / <u>1</u> / <u>2018</u> To	2/ <u>28</u> / <u>2018</u> Report Type: <u>18M02</u>							
Original Amendment Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , , 00	Expenditures \$,, <u>0</u> .00							
Loans \$,,0.00	Transfers to							
	Office Account \$,,,0.00							
Total Monetary \$,,,000								
	Total Monetary \$,,,0 00							
In-Kind \$,, 00								
	(8) Other Distributions \$, , 0.00							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>74</u> , <u>125</u> . <u>00</u>	\$, <u>42</u> , <u>076</u> . <u>00</u>							
(11) Cor	tification							
	son to falsify a public record (ss. 839.13, F.S.)							
I certify that I have examined this report and it is true, cor	rect, and complete:							
(Type name)	(Type name)							
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
X	<u>x</u>							
Signature	Signature							

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Better Miami	(2) I.D. Number					476
	2/1/2018		2	/28/2018		_	
(3) Cover Peri	od / /	thro	bugh	11	(4) Pag	e _⊥	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1	-						
1 1	-						
1 1	-						
1 1							
1 1	_						
/ 1	_						
1 1	-						
1 1	_						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name <u>Better Miami</u> (2) I.D. Number <u>1476</u>						
	2/1/2018 2 //through	2/28/2018 //	(4) Page <u>1</u>	of_	0	
(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	
_/ /						
_/ /						
_/ /						
11						
//						
11						
11						
11						

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES