	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
(1)	Better Miami	OFFICE USE ONLY								
(0)	Name	ONLINE SUBMISSION [1186133]								
(2)	3900 SW 26th Street Address (number and street)	Submitted on:								
	West Park, FL 33023	3/25/2019 11:39:07 (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) ☐ 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										
	er Period: From 3 / 1 / 2019 To									
<u>X</u> 0	riginal Amendment Spr	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$, , 000	Monetary								
Loans \$,,		Transfers to Office Account \$, , 0 . 00								
Total Monetary \$, , 0 . 00		Total Monetary \$, , 0 . 00								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$, , <u>0</u> 00								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>89</u> , <u>125</u> . <u>00</u>	\$, <u>79</u> , <u>915</u> . <u>69</u>								
Ιc		1								
	/pe name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		X								
-	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Better Miami				2) I.D. Numbe	er <u>1</u>	476
	3/1/2019		3	/31/2019		1	0
(3) Cover Perio	od / /	thro	ough	11_	(4) Pag	e <u> </u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	Co	(8)	(9) Contribution	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
J I	500			5545			
1 1							
1 1							
I I							
I I							
J I							
I I							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Bette	AMPAIGN TREASURER'S Rer Miami		EXPENDIT 2) I.D. Number		
	3/1/2019 3/ 1 1 through	31/2019	, I) Page <u>1</u>		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)	(11)
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