

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Better Miami

Name

(2) 3900 SW 26th Street

Address (number and street)

West Park, FL 33023

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 1476

OFFICE USE ONLY

ONLINE SUBMISSION

[1191400]

Submitted on:

9/4/2019 13:17:21 (eastern)

(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 8 / 1 / 2019 To 8 / 31 / 2019 Report Type: 19M08

☒ Original

☐ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 89 , 125 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 88 , 875 . 28

### (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 or electioneering comm.) ☐ Treasurer ☐ Deputy Treasurer

X

Signature

(Type name)

☐ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Better Miami (2) I.D. Number 1476  
 (3) Cover Period 8/1/2019 through 8/31/2019 (4) Page 1 of 0

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor<br>Type Occupation |  | (9)<br>Contribution<br>Type | (10)<br>In-kind<br>Description | (11)<br>Amendment | (12)<br>Amount |
|-------------|--|---------------------------------------|--|-----------------------------|--------------------------------|-------------------|----------------|
| / /         |  |                                       |  |                             |                                |                   |                |
|             |  |                                       |  |                             |                                |                   |                |
| / /         |  |                                       |  |                             |                                |                   |                |
|             |  |                                       |  |                             |                                |                   |                |
| / /         |  |                                       |  |                             |                                |                   |                |
|             |  |                                       |  |                             |                                |                   |                |
| / /         |  |                                       |  |                             |                                |                   |                |
|             |  |                                       |  |                             |                                |                   |                |
| / /         |  |                                       |  |                             |                                |                   |                |
|             |  |                                       |  |                             |                                |                   |                |
| / /         |  |                                       |  |                             |                                |                   |                |
|             |  |                                       |  |                             |                                |                   |                |
| / /         |  |                                       |  |                             |                                |                   |                |
|             |  |                                       |  |                             |                                |                   |                |

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Better Miami

(2) I.D. Number 1476

(3) Cover Period 8/1/2019 through 8/31/2019

(4) Page 1 of 0

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|-------------|--|--|----------------------------|-------------------|----------------|
| // /        |  |  |                            |                   |                |
|             |  |  |                            |                   |                |
| // /        |  |  |                            |                   |                |
|             |  |  |                            |                   |                |
| // /        |  |  |                            |                   |                |
|             |  |  |                            |                   |                |
| // /        |  |  |                            |                   |                |
|             |  |  |                            |                   |                |
| // /        |  |  |                            |                   |                |
|             |  |  |                            |                   |                |
| // /        |  |  |                            |                   |                |
|             |  |  |                            |                   |                |
| // /        |  |  |                            |                   |                |
|             |  |  |                            |                   |                |