CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	(PAC) An Accountable Miami-Dade	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION [1117686]						
(2)	2929 SW 3rd Avenue; Suite 220	Submitted on:						
	Address (number and street)	8/5/2016 15:52:09 (eastern)						
	Miami, FL 33129							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1488						
(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						
		☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	t Identifiers						
Cov	er Period: From 7 / 9 / 2016 To							
	Priginal Amendment Sp	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
	•	Monetary						
Casl	h & Checks \$, , ,0 . <u>00</u>	Expenditures \$, <u>130</u> , <u>025</u> . <u>00</u>						
امما	ns \$, , 0.00	Transferate						
Loar	s , , , ,	Transfers to Office Account \$, , 0 . 00						
Tota	I Monetary \$, , 0 . 00	,,,						
Tota	,,,	Total Monetary \$, 130 , 025 . 00						
In-Ki	ind \$, , 0.00	, 150 , 025 . 00						
III-IX	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions						
		\$,, 000_						
		, <u> </u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$, <u>190</u> , <u>424</u> . <u>69</u>						
	(44) 0	416: 41						
		tification son 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:								
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
<u>X</u>		<u>x</u>						
Si	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(PAC) An Accountab	le Miami-	Dade	(2) I.D. Numb	er ₁₄	88
	7/9/2016		7/22/201	.6		
(3) Cover Perio	od / /	through	1	/ (4) Pag	qe ¹	of ⁰
. ,						
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name	(-)		()	C	X2.
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contribu	tor Contribu	tion In-kind		
Number	City, State, Zip Code		upation Type	months and a second substitutions	Amendment	Amount
Section Control to the Control of th	7,		7	3-30-70-70-70-70-70-70-70-70-70-70-70-70-70		36 17 4 4/17/20 4/16/1
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name((PAC)	An Acc	counta	ole Miami-Dade			 (2) I.D. Number			1488	
		7/9/20	16		7/22/2	016		-			
(3) Cover Per	riod	1	1	through	/	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
7/11/2016	Block by Block, 1725 Eye St. NW. Ste. 900 Washington, DC 20006	canvassing	МО	Add	\$80,000.00
7/21/2016	Block by Block,	canvassing	MO	Add	\$50,025.00
2	1725 Eye St. NW Ste. 900 Washington , DC 20006				
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DS-DE 14 (Rev.	1		l .	L l	4