	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Good Government for Bal Harbour	OFFICE USE ONLY							
` ,	Name	ONLINE SUBMISSION							
(2)	600 Brickell Avenue; Suite1715	Submitted on:							
	Address (number and street)	11/5/2019 16:46:07 (eastern)							
	Coral Gables, FL 33131  City, State, Zip Code								
	_	(2) ID Number 1404							
	Check here if address has changed	(3) ID Number:1494							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐								
	☐ 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	dentifiers							
Cove	er Period: From $10$ / $1$ / $2019$ To	10 / 31 / 2019 Report Type: 19M10							
X O	riginal Amendment Sp	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
	_	Monetary							
Casl	h & Checks \$ , , ,0 . <u>00</u>	Expenditures \$ , , _10 . 00							
Loar	s \$, ,, 0.00	Transfers to							
Loai	is	Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , 0 . 00	,, ,, ,							
rota	, , , , , , , , , , , , , , , , , , ,	Total Monetary \$ , , 10 . 00							
In-Ki	ind \$ , , 0.00	, , , , , , , , , , , , , , , , , , , ,							
		(8) Other Distributions							
		\$, ,, <u>0</u> . <u>00</u>							
(0)	TOTAL Management Contribution To D. A.	(40) TOTAL M. ( F							
(9)	TOTAL Monetary Contributions To Date \$ , 2 , 600 . 00	(10) TOTAL Monetary Expenditures To Date \$ 2, 531.85							
	\$,2,_60000	\$, <u>2</u> , <u>531</u> . <u>85</u>							
	(11) Cer	tification							
	It is a first degree misdemeanor for any pers	on 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:									
(T <sup>,</sup>	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		x							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Good Government fo	r Bal Har	bour	(2) I.D. Numbe	er <u>1</u>	494
	10/1/2019		10/31/20	19		
(3) Cover Perio	od / /	through	1	/ (4) Pag	ge <sup>1</sup>	of <sup>0</sup>
	·	1001				
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					
(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
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Good	Governmen	t for	Bal	Harbour			 (2) I.D. Nun	nber		1494	
		10/1/2019	)		10/	31/2	019		-			
(3) Cover Per	riod	I	1	throu	ıgh	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
10/31/2019	FIRST AMERICAN BANK, 2295 GALIANO ST CORAL GABLES, FL 33134	bank fee	MO		\$10.00
1	CORAL GABLES, FL 33134				
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DS-DE 14 (Rev.	11/13 \				