

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Coral Gables First  
 Name  
 (2) 2600 S Douglas Road; Suite 900  
 Address (number and street)  
Coral Gables, FL 33134  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1256377]  
 Submitted on:  
 3/7/2022 10:02:47 (eastern)

Check here if address has changed (3) ID Number: 1991

(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 2 / 1 / 2022 To 2 / 28 / 2022 Report Type: 22M02  
 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 \$ \_\_\_\_\_ , \_\_\_\_\_ , 7 . 50  
 Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00  
 Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 7 . 50

**(8) Other Distributions**  
 \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$ \_\_\_\_\_ , 636 , 045 . 30

**(10) TOTAL Monetary Expenditures To Date**  
 \$ \_\_\_\_\_ , 511 , 435 . 46

### (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 Coral Gables First (2) I.D. Number 1991

2/1/2022 through 2/28/2022

(3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type      Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Coral Gables First

(2) I.D. Number 1991

(3) Cover Period 2/1/2022 through 2/28/2022

(4) Page 1 of 1

(5) Date	(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
(6) Sequence Number					
2/28/2022 //	PACIFIC NATIONAL BANK, 255 ARAGON AVE. CORAL GABLES, FL 33134	bank fees	MO		\$7.50
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