CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Coral Gables First	OFFICE USE ONLY							
` ,	Name	ONLINE SUBMISSION							
(2)	2600 S Douglas Road; Suite 900	Submitted on:							
	Address (number and street)	7/19/2024 18:03:34 (eastern)							
	Coral Gables, FL 33134								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:1991							
(4)	Check appropriate box(es):								
	Candidate Office Sought:								
	<ul><li>☒ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ Check here if PC or ECO has disbanded							
	Party Executive Committee (PTY)	☐ Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	dentifiers							
Cove	er Period: From 6 / 29 / 2024 To								
		ecial Election Report							
		T							
(6)	Contributions This Report	(7) Expenditures This Report							
	0.00	Monetary							
Cash	n & Checks \$ , , 0 . 00	Expenditures \$ , _26 , 207 . 00							
Loar	ns \$ , , 0.00	Transfers to							
Loai	,,,	Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , 0 . 00	,,,							
. 0.0		Total Monetary \$ , 26 ,207 .00							
In-Ki	nd \$ , , 0.00	,, ,, ,							
		(8) Other Distributions							
		\$,,000							
(0)									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$ <u>1</u> , <u>586</u> , <u>594</u> . <u>85</u>	\$ <u>1</u> , <u>316</u> , <u>005</u> . <u>18</u>							
	(11) Cer	tification							
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:									
/т.	(Type name) (Type name)								
	ype name) Individual (only for IE  Treasurer  Deputy Treasurer	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)							
	electioneering comm.)								
v									
X Si	gnature	X Signature							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Coral Gables First			(2) I.D. Number					
	6/29/2024		7	/12/2024					
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	e $\frac{1}{}$	of		
				r	г				
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount		
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Coral	Gables	First				 (2) I.D. Nun	nber	1	L991	
		6/29/20	)24		7/12/2	024	~ ~				
(3) Cover Pe	riod	I	1	through	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
7/2/2024	BERTHIER GROUP INC., 306 ALCAZAR AVENUE SUITE 303-B MIAMI, FL 33143	political consulting	МО		\$15,000.00
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7/2/2024	THE ARTISAN AGENCY, 4960 SW 72ND AVE., SUITE 202 MIAMI, FL 33155	media advertising	МО		\$11,207.00
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