CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Bal Harbour Is Not For Sale OFFICE USE ONLY								
Name ONLINE SUBMISSIC	N							
(2) 600 Brickell Avenue; Suite 1/15								
Address (number and street)	n)							
Mlami, FL 33131	,							
City, State, Zip Code								
Check here if address has changed (3) ID Number: 199	93							
(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	e filed							
individual making electioneering communications)								
(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 (7) Expenditures This Report								
Monetary								
Cash & Checks \$, 0.00 Expenditures \$, 15.	00							
Loans \$,, <u>0</u> . <u>00</u> Transfers to								
Office Account \$,,,	00							
Total Monetary \$,,,								
Total Monetary \$, ,	00							
In-Kind \$,, <u>0</u> . <u>00</u>								
(8) Other Distributions								
\$	_							
(9) TOTAL Monetary Contributions To Date (10) TOTAL Monetary Expenditures To	Date							
\$, <u>19</u> , <u>000</u> . <u>00</u> \$, <u>18</u> , <u>572</u> . <u>95</u>								
	_							
(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) (Type name)								
□ Individual (only for IE □ Treasurer □ Deputy Treasurer □ Candidate □ Chairperson (only for PC a	nd PTY)							
or electioneering comm.)								
x x								
Signature Signature								

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name				(2) I.D. Number			
	8/1/2019		8	/31/2019			
(3) Cover Perio	od / /	thro	ough	<i>ll</i>	(4) Pag	e _1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	Contributor		Contribution	In-kind		
Number	City, State, Zip Code	Туре	A STATE OF LAND AND A STATE AN	Туре	Description	Amendment	Amount
1 1							
1 1							
/ /							
1 1							
1 1							
1 1							
/ /							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Bal	CAMPAIGN TREASURER' Harbour Is Not For Sale		EXPENDITURES 2) I.D. Number		1993	
(3) Cover Period	8/1/2019 I//through_	8/31/2019 //	(4) Page <u>1</u>	of	1	
(5) Date (6) Sequence Number	(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	
	SUNTRUST, PO BOX 305183 NASHVILLE, TN 37230	bank fees	MO		\$15.00	
//						
_ / /						
_/ /						
_/ /						
_ / _						
11						
11						

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES