CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Sweetwater Residents for Honest Gover						
	Name	ONLINE SUBMISSION [1186510]					
(2)	2600 S. Douglas Rd.; Suite 800	Submitted on:					
	Address (number and street)	4/4/2019 17:31:22 (eastern)					
	Coral Gables, FL 33134 City, State, Zip Code						
		(2) ID Number					
	Check here if address has changed	(3) ID Number: 2205					
(4)	Check appropriate box(es):						
	Candidate Office Sought:						
		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							
Cove	er Period: From <u>3</u> / <u>1</u> / <u>2019</u> To	<u>3</u> / <u>31</u> / <u>2019</u> Report Type: <u>19M03</u>					
<u>X</u> 0	Priginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Casl	h & Checks   \$,,,0. <u>00</u>	Expenditures \$ , , , 00					
	ns \$,,0.00	Transform to					
Loar	IS	Transfers to Office Account \$ , , 0 . 00					
Tota	I Monetary \$,,0.00						
	· · · · · · · · · · · · · · · · · · ·	Total Monetary \$ , , 2 . 00					
In-Ki	ind \$,, 0.00	· · · · · · · · · · · · · · · · · · ·					
		(8) Other Distributions					
		\$,,000					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
.,	\$, <u>1</u> , <u>600</u> . <u>00</u>	\$,8900					
		tification 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:							
	ype name)	(Type name)					
	Individual (only for IE	Candidate Chairperson (only for PC and PTY)					
<u>X</u>		X					
Si	gnature	Signature					

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name							
(2) Carran Dari	3/1/2019	thre	3	/31/2019	(4) Dam	- 1	<b>.</b> 0
(3) Cover Peri	od / /	unc	Jugn	<i>ii</i>	(4) Pag	e	
(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	Occupation	Туре	Description	Amendment	Amount
1 1	_						
1 1							
/ /							
1 1	_						
1 1	_						
/ /	_						
/ /	_						
1 1	_						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Swe	<b>CAMPAIGN TREASURER</b> ? etwater Residents for Ho	nest	Government	) EXPENDIT 2) I.D. Numbei		2205
(3) Cover Period	3/1/2019 I/through_	3/31	/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
	TD Bank, 10603 NW 12th Street Doral, FL 33172		service charge	МО		\$2.00
_/ /						
_ / /						
11						
_/ /						
_/ /						
11						
11						

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