	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Ethical and Responsible Leadership	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION [1175432]					
(2)	17602 SW 84 Avenue	Submitted on:					
	Address (number and street) Palmetto Bay, FL 33157	10/10/2018 18:25:05 (eastern)					
-	City, State, Zip Code	<del></del>					
	☐ Check here if address has changed	(3) ID Number: 2211					
(4)	Check appropriate box(es):	(6) 15 (10)10011					
(~)							
	☐ Candidate Office Sought: ☐ Political Committee (PC)						
		☑ 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 10 / 6 / 2018 To	10 / 12 / 2018 Report Type: 18G5					
X Or	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Cash	n & Checks \$ , , 0 . 00	Expenditures \$ , , 0 . 00					
1	s \$ , , 0.00						
Loan	\$,, <u>0</u> .00	Transfers to Office Account \$					
Total	Monetary \$ , , 0.00	Office Account \$ , , , 0 . 00					
lUlai	Monetary \$,,,	Total Monetary \$ . 0 . 00					
In-Kiı	nd \$,, <u>0</u> .00	Total Monetary \$ , , 0 . 00					
III-KII	id	(8) Other Distributions					
		(8) Other Distributions \$ , , <u>0</u> 00_					
		, <u> </u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, <u>0</u> 00	\$ , , <u>0</u> . <u>00</u>					
	(11) Cert	tification					
	It is a first degree misdemeanor for any person						
l c	ertify that I have examined this report and it is true, corre	ect, and complete:					
(Tv	/pe name)	(Type name)					
	Individual (only for IE  Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
v		V					
Sic	gnature	X Signature					

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

	10/6/2018		10/12/2018 (2) I.D. Number 2211							
(3) Cover Period		thro	ugh	<i>ll</i>	(4) Pag	e	of			
Sequence	(7) Full Name Last, Suffix, First, Middle) Street Address &	-	(8) ntributor	(9)	(10) In-kind	(11)	(12)			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amoun			
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Ethica	al and	Respo	nsible Lea	dership	1	 (2) I.D. Nun	nber	2	2211	
		10/6/2	018		10/12/	2018	-	-			
(3) Cover Pe	riod		1	through	1	1	 (4) Page	1	of	0	

(5)	(7)	(8)	(9)	(10)	(11)
(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
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DS-DE 14 (Rev.	4440 V				,