	CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Vote Yes For a Better Miami	OFFICE USE ONLY ONLINE SUBMISSION									
<b>78</b> 1	Name	[1179025]									
(2)	PO BOX 452112	Submitted on:									
	Address (number and street) Miami, FL 33245	11/2/2018 15:56:11 (eastern)									
	City, State, Zip Code	<del></del>									
	☐ Check here if address has changed	(3) ID Number: 2213									
(4)	_	(-)									
(*)	(4) Check appropriate box(es):  ☐ Candidate Office Sought: ☐ X Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed										
	(5) Report	Identifiers									
	er Period: From <u>10</u> / <u>20</u> / <u>2018</u> To										
<u>X</u> 0	riginal Amendment Spo	ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Casl	n & Checks \$ , <u>46</u> , <u>000</u> . <u>00</u>	Monetary									
Loar		Transfers to Office Account \$ , , , 0 . 00									
Tota	I Monetary \$ , <u>46</u> , <u>000</u> . <u>00</u>	Total Monetary \$ , 41 ,458 .90									
In-Ki	ind \$ , , 0 . 00	, <u>11</u> , <u>130</u> , 1 <u>50</u>									
		(8) Other Distributions \$ , , 000_									
(9)	TOTAL Monetary Contributions To Date \$ ,46 ,00000	(10) TOTAL Monetary Expenditures To Date \$ , _41 , _45890									
(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											
X		<u>X</u>									
Si	gnature	Signature									

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

(1) Name	Vote Yes	For a Be	etter Miami	(2) I.D. Number							
	10/20	0/2018		11/1/	2018						
(3) Cover Period	d /	I	through	1	1	(4) Page	1	of <sup>1</sup>	-		

(5)	(7)	ĺ	(0)	(O)	(10)	(44)	(40)
(5)  Date (6)  Sequence  Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
10/20/2018	RESPONSIBLE MUNICIPAL , GOVERNMENT 2600 S DOUGLAS ROAD #900 CORAL GABLES, FL 33134	F	pac	СН			\$23,000.0
10/26/2018 / /	RESPONSIBLE MUNICIPAL, GOVERNMENT 2600 S DOUGLAS ROAD #900 CORAL GABLES, FL 33134	F	pac	СН			\$23,000.0
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	7ote	Yes	For	a I	Better Mia	ami			 (2) I.D. Nur	nber	2	2213	
		10/	20/2	018	3		11/1/2	018					
(3) Cover Per	riod		1	1	throug	ah	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
10/20/2018	T FORCE, PO BOX 803496 DALLAS, TX 75380	delivery fees	МО		\$23.90
1					
10/26/2018	305 STRATEGIC GROUP LLC, 1450 BRICKELL AVENUE 18th FLOOR MIAMI, FL 33131	mailers	МО		\$25,435.00
10/31/2018	305 STRATEGIC GROUP LLC, 1450 BRICKELL AVENUE 18th FLOOR MIAMI, FL 33131	mailers	МО		\$16,000.00
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