CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Citizens for Excellence In Miami-Dade							
	Name	ONLINE SUBMISSION [1187772]						
(2)	2600 Douglas Road; Suite 800	Submitted on:						
	Address (number and street)	5/9/2019 10:17:43 (eastern)						
	Coral Gables, FL 33134 City, State, Zip Code							
	_	(2) ID Number						
	Check here if address has changed	(3) ID Number: 2228						
(4)	Check appropriate box(es):							
	Candidate Office Sought:  Solitical 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						
Cov	er Period: From <u>4</u> / <u>1</u> / <u>2019</u> To	4 / <u>30</u> / <u>2019</u> Report Type: <u>19M04</u>						
<b>X</b> 0	Driginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cas	h & Checks \$,,,_0._00_	Expenditures \$,, <u>323</u> .88						
Loar	ns \$,,0.00	Transfers to						
LUai		Office Account \$ , , 0.00						
Tota	Il Monetary \$ , , 0 . 00							
	,	Total Monetary \$, 323 . 88						
In-Ki	ind \$,,0.00							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
. ,	\$, <u>2</u> , <u>500</u> . <u>00</u>	\$, 323.88						
(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:								
	ype name)	(Type name)						
	Individual (only for IE	Candidate Chairperson (only for PC and PTY)						
<u>X</u>		<u>X</u>						
Si	gnature	Signature						

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name							
	4/1/2019	1.1	4	/30/2019			. 0
(3) Cover Peri	od / /	thro	bugh	<i>II</i>	(4) Pag	e	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1	-						
1 1	-						
1 1	-						
1 1						2	
1 1							
1 1							
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Citizens for Excellence In Miami-Dade County Go (2) 1. D. Number 2228									
(3) Cover Perio	4/1/2019 4/ d/ /through	30/2019 _//(4	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				
4/5/2019 1	BankUnited, PO Box #521599 Miami, FL 33152	<pre>quickbook checks, dep/book,endors ement/stamp</pre>	МО		\$288.8				
4/5/2019	BankUnited, PO Box #521599 Miami, FL 33152	service charge	МО		\$35.0				
//									
_/ /									
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES