CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Transparency and Accountability for N							
	Name	ONLINE SUBMISSION						
(2)	2600 S Douglas Road; Suite 800	Submitted on:						
	Address (number and street)	10/21/2020 18:07:56 (eastern)						
	Coral Gables, FL 33134							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 2230						
(4)	Check appropriate box(es):							
	Candidate Office Sought:							
	▼ Political Committee (PC) Elections or a (ECC)	☐ Check here if PC or ECO has disbanded						
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	dentifiers						
Cove	er Period: From $10 / 10 / 2020$ To							
		ecial Election Report						
		T						
(6)	Contributions This Report	(7) Expenditures This Report						
Streets Street	Φ	Monetary						
Casl	h & Checks \$, , 0 . 00	Expenditures \$, , 600 . 00						
Loar	s \$, ,, 0.00	Transfers to						
LUai	, _ ,	Office Account \$, , 0 . 00						
Tota	I Monetary \$, , 0 . 00	,,,						
Tota	,,,,	Total Monetary \$, , 600 . 00						
In-Ki	ind \$, , 0.00	,, ,						
111-131	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions						
		\$,,,000						
		, , , , ,						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$, <u>47</u> , <u>899</u> . <u>59</u>						
	(44) 0	(15) Al						
(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>		Χ						
Si	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

	10/10/2020		10/16/2020		_	
(3) Cover Period	· / /	_ through _	11	(4) Pag	ge <u> </u>	of 0
(5) Date (6)	(7) Full Name [Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor	27 SCHEDOSCHERTS/VERINGS/AUGUST/CCCC	In-kind Description	Amendment	Amoun
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Transparency	and	Accountabil	ity for	Miami	(2) I.D. I	Number_		2230	
	10/10/	2020		10/16/2	020					
(3) Cover Pe	riod /	1	through	1	1	(4) Page	a 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
10/16/2020	GEMRT, 2600 S Douglas Road Suite 800	accounting & reporting services	MO		\$600.00
1	Coral Gables, FL 33134				
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DS-DE 14 (Rev.	44/42 \				