CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Citizens For A Better Miami Dade Gov								
Name	ONLINE SUBMISSION [1212702]							
(2) <u>3128 Coral Way</u> Address (number and street)	Submitted on:							
Address (number and street) Miami, FL 33145	6/22/2020 14:57:56 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 2318							
(4) Check appropriate box(es):								
Candidate Office Sought:								
 Political Committee (PC) Electioneering Communications Org. (ECO) 	Check here if PC or ECO has disbanded							
	Check here if PTY has disbanded							
	☐ Check here if no other IE or EC reports will be filed							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From <u>6</u> / <u>1</u> / <u>2020</u> To	6 / <u>12</u> / <u>2020</u> Report Type: <u>20P1</u>							
Criginal Amendment Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , , 00	Expenditures \$, , , 0 . 00							
Loans \$,,0.00	Transfers to							
	Office Account \$ _ , _ , _ 0 . 00							
Total Monetary \$,, 0.00								
	Total Monetary \$, , 0 . 00							
In-Kind \$,, 00								
	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, <u>0</u> . <u>00</u>	\$,, <u>0</u> . <u>00</u>							
(4) 2								
(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) (Type name)								
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
or electioneering comm.)								
X	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name Citizens For A Better Miami Dade Governmen (2) I.D. Number							
(2) Course Dori	6/1/2020	thr	6	/12/2020	(4) Dem	_ 1	ef 0	
(3) Cover Perio	od//		Jugn	11	(4) Pag	e		
(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	-							
1 1	_							
/ /	_							
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) NameCitizens For A Better Miami Dade Government (2) I.D. Number2318								
(3) Cover Period	6/1/2020 ///through	6/12/2020 /(4	4) Page <u>1</u>	of	0			
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)			
Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount			
_/ /								
_/ /								
//								
_/ /								
//								
11								
11								

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES