CAMPAIGN TREASURER'S REPORT SUMMARY										
(1) (2)	Citizens For A Better Miami Dade Gove Name 3128 Coral Way	OFFICE USE ONLY ONLINE SUBMISSION [1249685]								
(2)	Address (number and street)  Miami, FL 33145  City, State, Zip Code	Submitted on: 10/4/2021 10:17:48 (eastern)								
	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) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)  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									
(5) Report Identifiers										
Cover Period: From $9 / 1 / 2021$ To $9 / 30 / 2021$ Report Type: $21M09$ $\square$ Original $\square$ Amendment $\square$ Special Election Report										
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$,,,	Monetary								
Loans \$,,,		Transfers to Office Account \$ , , , 0 · 00								
Tota In-Ki	Monetary \$,,,0 and \$ , , 0 . 00	Total Monetary \$ , , 0 . 00								
		(8) Other Distributions \$ , , 000								
(9)	<b>TOTAL Monetary Contributions To Date</b> \$ ,64 ,00000_	(10) TOTAL Monetary Expenditures To Date \$ ,45_ ,22290_								
(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		X								
Sig	gnature	Signature								

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

(1) Name	Citizens For A Bet	ter M	iami Dade	Governmen	2) I.D. Numbe	r2	2318
	9/1/2021			/30/2021			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Pag	e	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(0)	(0)	(15)	7.19	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	A ma a cont
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Cit	CAMPAIGN TREASURER'S RE izens For A Better Miami Dade	e Government	EXPENDIT 2) I.D. Number		2318
(3) Cover Period	9/1/2021 9/30 I/through/	)/2021 //(4	4) Page <u>1</u>		0
(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)	(11) Amount
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