CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	(PTY) Republican Party of Miami-Dade	County OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	1460 NW 107th Avenue	[1088498]							
	Address (number and street)	Submitted on:							
	Doral, FL 33172-2734	6/19/2015 18:51:07 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:566							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: ☑ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ 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							
Cove	er Period: From 1 / 1 / 2015 To	3 / 31 / 2015 Report Type:15-Q1							
0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	n & Checks \$,,, <u>0</u> . <u>00</u>	Monetary Expenditures \$, , 0 . 00							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , 0 . 00	Total Monetary \$, , 0 . 00							
In-Ki	nd \$,,,000								
		(8) Other Distributions \$, , <u>0</u> 0 _							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$ <u>1</u> , <u>544</u> , <u>769</u> . <u>51</u>	\$ <u>1</u> , <u>572</u> , <u>309</u> . <u>54</u>							
(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	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		_x							
Sig	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(I) Name(I	PTY) Republican P	arty (<u>Dade County</u> /31/2015	ال. الع. Numbe	·5	566
(3) Cover Period	1/1/2015 ///	thro			(4) Pag	e1	of
				r			Ĭ
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
	ast, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	(PTY)	Republican	Party of	Miami-Dade	County	(2) I.D. Num	ber	5	566	
		1/1/2015		3/31/2015						
(3) Cover Pe	riod	I	throug	h / /		(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
1/12/2015	US Treasury, IRS Cincinnatti, OH 45999	pr taxes overpayment refund	МО	Delete	\$-198.66
1/12/2015	US Treasury, IRS Cincinnatti, OH 45999	pr taxes overpayment refund	RE	Add	\$-198.66
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