CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	(PAC) Committee for Responsibility in								
	Name	ONLINE SUBMISSION							
(2)	215 Romano Avenue	Submitted on:							
	Address (number and street)	10/28/2016 10:13:05 (eastern)							
	Coral Gables, FL 33134 City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 863							
(4)	Check appropriate box(es):	(6) 12 1141112611							
(~)	☐ Candidate Office Sought:								
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
	☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Panari	dentifiers							
Cove	er Period: From 10 / 15 / 2016 To								
	riginal Amendment Spr	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , , 000	Monetary							
Loar	s , , ,	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , 0 . 00								
		Total Monetary \$, _12 , 000 . 00							
In-Ki	ind \$, , ,0 . <u>00</u>								
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$	\$							
(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)								
	ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(PAC) Committee fo	r Res	ponsibilit	y in Gove	2) dr.D. Numbe	r8	163
	10/15/2016		1	0/21/2016			
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e	of
						(CE-10)	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	(PAC)	Committ	cee fo	or Respons	ibility	in	Governmen(2) I.D. Number	60 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	863	
		10/15/2	016		10/21/2	2016	5			
(3) Cover Per	riod	1	1	through	1	1	(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
10/20/2016	Politique, 300 W 41 Street #214 Miami Beach, FL 33140	consulting	MO		\$10,000.00
1 10/21/2016 / / 2	Magna Consulting, 5 Kensington Circle, Ste F Garnerville, NY 10923	consulting	МО		\$2,000.00
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