CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Committee for Responsibility in Gover								
	Name	ONLINE SUBMISSION							
(2)	215 Romano Avenue	Submitted on:							
	Address (number and street)	1/11/2021 14:40:20 (eastern)							
	Coral Gables, FL 33134 City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 863							
(4)		(b) 12 Number							
(+)	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	t Identifiers							
Cove	er Period: From <u>12</u> / <u>1</u> / <u>2020</u> To	12 / 31 / 2020 Report Type: 20M12							
× o	riginal Amendment Sp	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , ,000	Monetary							
Loar	 - - 	Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$,,	Total Monetary \$,6 , <u>022</u> . <u>24</u>							
In-Ki	ind \$, , 0 . <u>00</u>								
		(8) Other Distributions \$, , <u>0</u> 00_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T	(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								
<u>X</u>		X Signature							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

	12/1/2020		1	2/31/2020		_	•	
(3) Cover Perio	d//	thro	ough	<i>I I</i>	(4) Pag	je ¹	of	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount	
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Committee	for	Responsibilit	y in	Gov	ernment	i	(2) I.D. Num	ber	8	363	-
	12/1	/202	20	12/3	31/2	020						
(3) Cover Pe	riod /		/ through		/	1		(4) Page	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
12/3/2020	HPS Communications, 1623 SW 23 Street Miami, FL 33145	mailers	МО		\$4,022.24
1				i.	
12/15/2020	Double Take Mktg LLC, 4655 Bougainvilla Drive Apt. 6 Ft. Lauderdale, FL 33308	marketing consulting	МО		\$2,000.00
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