FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) (PAC) Committee for Responsibility in (Government OFFICE USE ONLY						
Name (2) 215 Romano Avenue	ONLINE SUBMISSION						
Address (number and street)	Submitted on:						
<u>Coral Gables, FL 33134</u> City, State, Zip Code	7/10/2013 15:58:19 (eastern)						
CHECK IF ADDRESS HAS CHANGED	(3) ID Number: 863						
(4) Check appropriate box(es): □ Candidate (office sought): □ Political Committee □ Committee of Continuous Existence □ Check IF PC HAS DISBANDED □ Committee of Continuous Existence □ Party Executive Committee □ Electioneering Communication □ CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED							
(5) REPORT	IDENTIFIERS 6/30/2013						
Cover Period: From / To To	0730/2013 / Report Type Q2-13						
I Original Amendment Special Election	Report Independent Expenditure Report						
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT						
Cash & Checks \$0.00	Monetary Expenditures \$ 2,375.00						
Loans \$0.00	Transfers to Office Account \$ 0.00						
Total Monetary \$ ^{0.00}	Total						
In-Kind \$ 0.00	Monetary \$ 2,375.00						
	(8) Other Distributions \$0.00						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$57,100.00	\$48,670.88_						
(11) CERTIFICATION							
	on 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)						
electioneering commun.)	electioneering commun. organization)						
Signature	Signature						
DS-DE 12 (Rev. 08/04)	web9						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name(PAC) Committee for Responsibility in Gover? Number							863	
	4/1/2013		6	/30/2013				
(3) Cover Peri	od / /	thro	ough	I I	(4) Pag	e _1	of	
(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	_							
1 1								
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name (PA	(1) Name (PAC) Committee for Responsibility in Governmen(2) I.D. Number 863							
(3) Cover Perio	4/1/2013 6/3 d//through	30/2013 _// (4	4) Page <u>1</u>	of_	1			
(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) Amendment	(11) Amount			
6/17/2013 1	Board of County Commissioners,	late filing fee f2-12 report	МО		\$2,375.00			
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES