FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS CAMPAIGN TREASURER'S REPORT SUMMARY						
(1) (PAC) Committee for Responsibility in Go	overnment OFFICE USE ONLY					
Name (2) 215 Romano Avenue	ONLINE SUBMISSION [1055434]					
Address (number and street)	Submitted on:					
<u>Coral Gables, FL 33134</u> 7/11/2013 12:31:14 (eastern) <b>City, State, Zip Code</b>						
CHECK IF ADDRESS HAS CHANGED (3) ID Number: 863						
(4) Check appropriate box(es):  Candidate (office sought):  Political Committee  Committee of Continuous Existence Party Executive Committee  Electioneering Communication  CHECK IF PC HAS DISBANDED  CHECK IF CCE HAS DISBANDED  CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED						
(5) REPORT II						
Cover Period: From $\frac{4/1/2013}{l}$ To	$6/30/2013$ / Report Type $Q^{2-13}$					
☐ Original ☐ Amendment ☐ Special Election	Report Independent Expenditure Report					
(6) CONTRIBUTIONS THIS REPORT	(7) EXPENDITURES THIS REPORT					
Cash & Checks \$	Monetary Expenditures \$ 0.00					
Loans \$	Transfers to Office Account \$ 0.00					
Total Monetary \$	Total Monetary \$ 0.00					
In-Kind \$						
	(8) Other Distributions \$ 0.00					
(9) TOTAL Monetary Contributions To Date \$57,100.00_	(10) TOTAL Monetary Expenditures To Date \$48,670.88_					
(11) CERTII						
(Type name)	I certify that I have examined this report and it is true, correct, and complete.  (Type name)					
☐ Individual (only for election eering commun.)  Treasurer ☐ Deputy Treasurer  Deputy Treasurer	Candidate Chairperson (only for PC, PTY & electioneering commun. organization)					
Signature	Signature					

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

(PAC) Committee for Responsibility in Government Mumber 863							
	4/1/2013 6/30/2013						
(3) Cover Perio	od//			(4) Pag	e <sup>1</sup>	of <sup>0</sup>	
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(5)	(7)	(8)	(9)	(10)	(11)	(12)	
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Contributor	Contribution	In-kind			
Number	City, State, Zip Code	Type Occupation	Туре	Description	Amendment	Amount	
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	(PAC)	Committ	ee for	Respons	ibility	in	Governmen(2) I.D. Number	86	63
		4/1/2013	3		6/30/20	13			
(3) Cover Pe	riod	1	1	through	1	1	(4) Page 1 (	ρf	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
6/17/2013	Board of County Commissioners,	late filing fee f2-12 report	MO	Delete	\$2,375.00
1					
6/17/2013	Board of County Commissioners, 2700 NW 87th Ave Miami, FL 33172	late filing fee f2-12 report	МО	Add	\$2,375.00
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DS-DE 14 (Rev					