

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Miami Good Government Initiative-5.4.2021

Name

(2) PO BOX 3725 West Flagler St. #195

Address (number and street)

Coral Gables, FL 33134

City, State, Zip Code

Check here if address has changed

(3) ID Number: 63

(4) 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

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ONLINE SUBMISSION
[1283090]

Submitted on:
10/7/2022 16:29:51 (eastern)

(5) Report Identifiers

Cover Period: From 9 / 1 / 2022 To 9 / 30 / 2022 Report Type: M09

Original

Amendment

Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 25 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 25 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 474 , 501 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 474 , 077 . 18

(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 or electioneering comm.) Treasurer Deputy Treasurer

X

Signature

(Type name)

Candidate Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Miami Good Government Initiative-5.4.2021 (2) I.D. Number 63

9/1/2022 through 9/30/2022

(3) Cover Period / / through / / (4) Page 1 of 0

(5) Date	(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) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Miami Good Government Initiative-5.4.2021

(2) I.D. Number 63

(3) Cover Period 9/1/2022 through 9/30/2022

(4) Page 1 of 1

(5) Date	(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) Sequence Number					
9/15/2022 //	CITY NATIONAL BANK, 8411 SW 40 STREET MIAMI, FL 33155	bank fees	MO		\$25.00
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