

## CAMPAIGN TREASURER'S REPORT SUMMARY

**(1) Beach Residents for Quality of Life**

Name

**(2) 2618 Centennial Place**

Address (number and street)

Tallahassee, FL 32308

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY

PM 11/6/15

**(3) ID Number:** \_\_\_\_\_

**(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

**(5) Report Identifiers**

Cover Period: From 10 / 30 / 15 To 10 / 30 / 15 Report Type: R1

Original

Amendment

Special Election Report

**(6) Contributions This Report**

Cash & Checks \$ \_\_\_\_\_ , \_\_\_\_\_ , 0.00

Loans \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , \_\_\_\_\_ , 0.00

In-Kind \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

**(7) Expenditures This Report**

Monetary Expenditures \$ \_\_\_\_\_ , 4,250.00

Transfers to Office Account \$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_ , 4,250.00

**(8) Other Distributions**

\$ \_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

**(9) TOTAL Monetary Contributions To Date**

\$ \_\_\_\_\_ , \_\_\_\_\_ , 0.00

**(10) TOTAL Monetary Expenditures To Date**

\$ \_\_\_\_\_ , 4,250.00

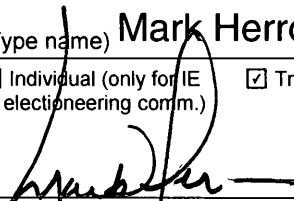
**(11) Certification**

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) Mark Herron

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 Beach Residents for Quality of Life (2) I.D. Number \_\_\_\_\_

(3) Cover Period <sup>10</sup> / <sup>30</sup> / <sup>15</sup> through <sup>10</sup> / <sup>30</sup> / <sup>15</sup> (4) Page <sup>1</sup> of <sup>1</sup>

(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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*Strategically Positioned in Florida's Capital*

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11/06/2015

FBI/DOJ

**US POSTAGE \$000.48<sup>5</sup>**



ZIP 32308

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