	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Beach Residents for Quality of Life	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	2618 Centennial Place	Submitted on:					
	Address (number and street)	1/2/2019 13:42:03 (eastern)					
	Tallahassee, FL 32308	2,2,232 25 25 35 (2332 7					
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:33					
(4)	Check appropriate box(es):						
	Candidate Office Sought:						
	☐ Political Committee (PC) ☑ Electioneering Communications Org. (ECO) [☐ Check here if PC or ECO has disbanded					
	Party Executive Committee (PTY)	☐ Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	: Identifiers					
Cove		12 / 31 / 2018 Report Type: M12					
		ecial Election Report					
		T					
(6)	Contributions This Report	(7) Expenditures This Report					
	· · · · · · · · · · · · · · · · · · ·	Monetary Expanditures C 000					
Casr	h & Checks \$,,,000	Expenditures \$, , 0 . 00					
Loan	ns \$, , 0.00	Transfers to					
LUGII	,,,	Office Account \$, , 0 . 00					
Total	I Monetary \$, , 0 . 00	· · · · _ <u> </u>					
		Total Monetary \$, , 0 . 00					
In-Ki	ind \$, , 0.00	· · · · · · · · · · · · · · · · · · ·					
		(8) Other Distributions					
		\$,,000					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, <u>10</u> , <u>800</u> . <u>00</u>	\$					
	I (11) Cert	l tification					
	It is a first degree misdemeanor for any person						
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:					
/ T\	(ma nama)	(Type name)					
	ype name) Individual (only for IE	(Type name) Candidate Chairperson (only for PC and PTY)					
	electioneering comm.)	G Strangerson, control of the contro					
Х		X					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Beach Residents fo	r Qua	lity of Li	fe (2) I.D. Numbe	r3	3
	12/1/2018		1	2/31/2018			
(3) Cover Peri	od , / , /	thro	ough	11_	(4) Page	e <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
1 1							
1 1							
1 1							
1 1							
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1 1							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Beach	Resident	s for	Quality	of	Life	(2)	I.D. Num	ber		33	T
		12/1/201	3		12,	/31/2018						- 0
(3) Cover P	eriod	I	1	through		1 1	(4)	Page	1	of	0	

(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
11					
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11					
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11					
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DS-DE 14 (Rev.	11/13 \	-			