	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1) (2) (4)	CAMPAIGN TREASURE Miami Beach Gateway Community Alliand Name 301 Ocean Drive; #604 Address (number and street) Miami Beach, FL 33139 City, State, Zip Code Check here if address has changed Check appropriate box(es): Candidate Office Sought: X Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an	ONLINE SUBMISSION [1171021] Submitted on: 9/4/2018 11:18:35 (eastern) (3) ID Number:						
	individual making electioneering communications)	Check here if no other IE or EC reports will be filed						
	(5) Report	Identifiers						
Cover Period: From 8 / 1 / 2018 To 8 / 31 / 2018 Report Type: M8								
× O	riginal Amendment Spo	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash	n & Checks \$,,,000	Monetary						
Loar		Transfers to Office Account \$, , , 0 . 00						
	Monetary \$,,,	Total Monetary \$, , _20 . 00						
In-Ki	nd \$,, <u>0</u> .00	(0) 011 5: (1) (1						
		(8) Other Distributions \$, , <u>0</u> 00						
(9)	TOTAL Monetary Contributions To Date \$, , _20000	(10) TOTAL Monetary Expenditures To Date \$, , 8000_						
	It is a first degree misdemeanor for any persertify that I have examined this report and it is true, corr	tification on to falsify a public record (ss. 839.13, F.S.) ect, and complete: (Type name)						
	/pe name) Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		<u>X</u>						
Sig	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Miami Beach Gatewa	y Com			ֆիվ.D. Numbe	er3	4
(3) Cover Perio	8/1/2018 od////	thro	ough	/31/2018 ///	(4) Pag	je <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Miami	Beach	Gateway	Communit	y Alliance	PC,	Inc · (2) I.D. Numbe	r	34	
		8/1/20	18		3/31/2018		· ·			
(3) Cover Pe	riod	1	1	through	1 1		(4) Page 1	0	f	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
8/15/2018	City National Bank, 446 Collins Ave. Miami Beach, FL 33139	monthly service fee.	МО		\$20.00
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