

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Friends of our Miami Beach Convention Center Hotel

Name

(2) 2600 South Douglas Road; Ste. 900

Address (number and street)

Coral Gables, FL 33134

City, State, Zip Code

Check here if address has changed

OFFICE USE ONLY
ONLINE SUBMISSION
 [1191352]

Submitted on:
 9/3/2019 15:34:14 (eastern)

(3) ID Number: 39

(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 8 / 1 / 2019 To 8 / 31 / 2019 Report Type: M08

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 \$, , 22 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 22 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ 1 , 343 , 400 . 00

(10) TOTAL Monetary Expenditures To Date

\$ 1 , 342 , 664 . 62

(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 Friends of our Miami Beach Convention Center Hotel (2) I.D. Number 39

8/1/2019 through 8/31/2019

(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
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Friends of our Miami Beach Convention Center Hotel (2) I.D. Number 39

(3) Cover Period 8/1/2019 through 8/31/2019 (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					
8/9/2019 / /	REGIONS , 2800 PONCE DE LEON BLVD CORAL GABLES , FL 33134	bank fee	MO		\$22.00
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					