CAMPAIGN TREASUR	ER'S REPORT SUMMARY
(1) Friends of our Miami Beach Conventi Name	on Center Hotel OFFICE USE ONLY ONLINE SUBMISSION [1195054]
(2) 2600 South Douglas Road; Ste. 900	
Address (number and street)	Submitted on: 11/15/2019 13:01:02 (eastern)
Coral Gables, FL 33134	11/15/2019 13:01:02 (eastern)
City, State, Zip Code	
Check here if address has changed	(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) Repo	ort Identifiers
Cover Period: From 11 / 2 / 2018 T	
<u> </u>	
☐ Original X Amendment ☐ S	Special Election Report
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$, , 0 . 00	Monetary
Loans \$,,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00
Total Monetary \$	Total Monetary \$, , , , 85
In-Kind \$,,	
	(8) Other Distributions \$, , 000_
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$ <u>1</u> , <u>343</u> , <u>400</u> . <u>00</u>	\$ <u>1</u> , <u>342</u> , <u>551</u> . <u>77</u>
It is a first degree misdemeanor for any pe	ertification rson to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, co	orrect, and complete:
(Type name)	(Type name)
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)
X	x
Signature	Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Friends of our Mia	mi Be	ach Conver	ntion Cent	2) H.DNumbe	r3	9
	11/2/2018		1	1/30/2018		-	•
(3) Cover Perio	od / /	thro	ough	11_	(4) Pag	e <u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1				0-3.6	54		
1 1							
1 1							
I I							
j j							
1 1							
1 1							
1 1							
DS-DE 13 (Rev. 11/13	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES	

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Friends	of	our	Miami	Beach	Convention	Center	^{Но} (2) 1.D. Numbe	r	3	9	300
	11	/2/	2018	}		11/30/2018	}					
(3) Cover Pe	eriod	1	1	' t	hrouah	1 1		(4) Page 1		of	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
11/28/2018	STRATEGIC ALLIES , 9111 E BAY HARBOR DRIVE BAY HARBOR ISLANDS, FL 33154	courier/ election day meals	MO	Delete	\$156.85
11/28/2018	STRATEGIC ALLIES , 9111 E BAY HARBOR DRIVE BAY HARBOR ISLANDS, FL 33154	courier/ election day meals	МО	Add	\$0.00
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/ / DS-DE 14 (Rev.					