FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
14 JUL 21 PM 1:54
Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

BORGIA FOR FLORIDA

ADDRESS (number and street) ▼ 4611 S UNIVERSITY DR #178

Check if different than previously reported. (ACC)

CITY ▲ DAVIE STATE ▲ FL ZIP CODE ▲ 33328 -

2. **FEC IDENTIFICATION NUMBER ▼** C C00505941

3. IS THIS REPORT [X] NEW (N) **OR** AMENDED (A)

STATE ▼ FL DISTRICT 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- [ ] April 15 Quarterly Report (Q1)
- [X] July 15 Quarterly Report (Q2)
- [ ] October 15 Quarterly Report (Q3)
- [ ] January 31 Year-End Report (YE)
- [ ] Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- [ ] Primary (12P)
- [ ] General (12G)
- [ ] Runoff (12R)
- [ ] Convention (12C)
- [ ] Special (12S)

Election on M M / D D / Y Y in the State of

(c) 30-Day **POST**-Election Report for the:

- [ ] General (30G)
- [ ] Runoff (30R)
- [ ] Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 04 01 2014 through 06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CHRIS BORGIA

Signature of Treasurer *CHRIS BORGIA* Date 07 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)

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