CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) People for Stronger Neighborhoods	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1155160]							
(2) 600 Brickell Avenue; Suite 1715	Submitted on:							
Address (number and street)	5/16/2018 15:09:54 (eastern)							
Miami, FL 33131								
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 1980							
(4) Check appropriate box(es):								
Candidate Office Sought:								
Political Committee (PC) Electioneering Communications Org. (ECO)	X Check here if PC or ECO has disbanded							
	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								
Cover Period: From 5 / 1 / 2018 To	5 / 31 / 2018 Report Type: 18M05							
	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$,, 0.00	Expenditures \$, , 15.03							
Loans \$,, <u>0</u> .00	Transfers to							
	Office Account \$,, 0 . 00							
Total Monetary \$,, 00								
	Total Monetary \$, , <u>15</u> . <u>03</u>							
In-Kind \$,,0 00								
	(8) Other Distributions							
	\$,, <u> 00</u> . <u> 00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>159</u> , <u>000</u> . <u>00</u>	\$, <u>159</u> , <u>000</u> . <u>00</u>							
· , <u> </u>	· , <u> </u>							
(11) Cert								
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, corr	ect, and complete:							
(Type name)	(Type name)							
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
or electioneering comm.)								
x	x							
Signature	Signature							

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	People for Stronger Neighborhoods (2) I.D. Number 1980						
	5/1/2018		5	/31/2018			
(3) Cover Peri	od / /	thro	ough	<i>ll</i>	(4) Pag	e _1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1	-						
1 1	-						
1 1							
1 1	_						
1 1	_						
1 1	_						
1 1	_						
1 1	_						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Peo		ENDITURES Number ¹⁹⁸⁰			
(3) Cover Period	5/1/2018 I/_/through_	5/31/2018 //(4) Page <u>1</u>	of	1
(5) Date (6) Sequence	(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
	GOVERNMENT WITH TRANSPARENCY, 2600 S DOUGLAS RD, STE 900 CORAL GABLES, FL 33134	pc contribution	MO		\$15.03
_/ /					
//					
_/ /					
//					
_/ /					
11					
11					

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES