CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Brevard Citizens for Workforce Housin	ONLINE SUBMISSION					
(2)	4651 Babcock St NE; Suite 18 #317	[1286942]					
	Address (number and street)	Submitted on:					
	Palm Bay, FL 32905	11/4/2022 18:20:30 (eastern)					
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 941					
(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 PTY has disbanded ☐ Check here if no other IE or EC reports will be filed						
	(5) Report	Identifiers					
	er Period: From 10 / 22 / 2022 To						
<u> </u>	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cash	n & Checks \$, , ,000	Monetary					
Loans \$,,,000		Transfers to Office Account \$, , , 0 . 00					
	I Monetary \$,,,000	Total Monetary \$, , 0 . 00					
In-Ki	nd \$,,, <u>0</u> . <u>00</u>						
		(8) Other Distributions \$, , 000_					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,,,	\$,, <u>0</u> . <u>00</u>					
Ιc	(11) Cert It is a first degree misdemeanor for any pers ertify that I have examined this report and it is true, corr	• • • • • • •					
(Ty	ype name)	(Type name)					
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Brevard Citizens for Workforce Housing						
(3) Cover Period	10/22/2022 I//	through	1/3/2022	(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	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
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1 1						
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(1) Name Brey	CAMPAIGN TREASURER'S REvard Citizens for Workforce F	Housing (8/2022	D EXPENDIT 2) I.D. Number 4) Page1		941
(5) Date (6) Sequence Number	(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
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