CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Citizens for an Elected Mayor	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1235073]							
(2) P.O. Box 1708	Submitted on:							
Address (number and street) Dania Beach, FL 33004	10/18/2020 17:37:54 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 587							
(4) Check appropriate box(es):								
Candidate Office Sought:								
⊠ Political Committee (PC)								
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	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 <u>10</u> / <u>3</u> / <u>2020</u> To	o <u>10</u> / 9 / 2020 Report Type: <u>G5</u>							
□ Original	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , 00	Expenditures \$, , , 00							
Loans \$,,0.00	Transfers to							
	Office Account \$,, 0 . 00							
Total Monetary \$, , 0.00								
	Total Monetary \$, , 0 . 00							
In-Kind \$,, 000								
	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, 1, 100.00	\$,, 216 . 00							
(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, co								
(Type name) ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer	(Type name)							
or electioneering comm.)								
x	X							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Citizens for an Elected Mayor</u>					(2) I.D. Number			
	10/3/2020		1	0/9/2020				
(3) Cover Perio	od / /	thro	ough	I I	(4) Pag	e	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	A STATE OF LAND AND A STATE AN	Туре	Description	Amendment	Amount	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name <u>Citizens for an Elected Mayor</u> (2) I.D. Number <u>587</u>							
(3) Cover Period	10/3/2020 /through_	10/9/2020 //(4) Page <u>1</u>	of	0		
(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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