	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	People United for Public Safety	OFFICE USE ONLY						
ā a	Name	ONLINE SUBMISSION						
(2)	P.O. Box 77007	Submitted on:						
	Address (number and street) Jacksonville, FL 32226	6/12/2023 14:44:47 (eastern)						
	City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 1254						
(4)	Check appropriate box(es):							
(-7	Candidate Office Sought:							
	X 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						
Cove	er Period: From 5 / 12 / 2023 To							
□ 0		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
` '		Monetary						
Cash	h & Checks \$, , ,000	Expenditures \$, , 0 . 00						
	ns \$, , 0.00							
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Tota	I Monetary \$, , 0 . 00	,,,						
. 0.0	, monotary	Total Monetary \$, , 0 . 00						
In-Ki	ind \$, , 0.00							
		(8) Other Distributions						
		\$,,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,, <u>0</u> . <u>00</u>	\$, , <u>0</u> . <u>00</u>						
		(15: 4:						
	(11) Cert It is a first degree misdemeanor for any pers							
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:						
	(Type name) (Type name)							
	ype name) Individual (only for IE	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)						
	electioneering comm.)							
Х		×						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	People United for	Publi	c Safety		2) I.D. Numbe	er	254
(3) Cover Peri	5/12/2023 od///	thro	ough	/31/2023 //_	(4) Pag	e <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	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
Number	City, State, Zip Code	туре	Occupation	Туре	Description	zanonanone	Amount
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	People	Unite	d for	Public	Safe	ety		 (2) I.D. Nun	nber	-	1254	97
	Ę	5/12/20	23		5	/31/20	023					-
(3) Cover Pe	riod	1	1	throug	h	1	1	(4) Page	1	of	0	

(5) Date	(7) Full Name	(8)	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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