| CAMPAIGN TREASU   | RER'S REPORT SUMMARY  |
|---|---|
| Name 3150 SW 38th Avenue; 11th Floor Address (number and street) Miami, FL 33146 City, State, Zip Code Check here if address has changed  (4) Check appropriate box(es): Candidate Office Sought: X Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) | Check here if PC or ECO has disbanded  Creater Public I and OFFICE USE ONLY ONLINE SUBMISSION [1241091]  Submitted on: 1/4/2021 17:33:28 (eastern)  [1408]  Check here if PC or ECO has disbanded [150] Check here if PTY has disbanded |
| ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)   | ☐ Check here if no other IE or EC reports will be filed   |
| (5) Re  | port Identifiers  |
| Cover Period: From <u>12</u> / <u>1</u> / <u>2020</u>   | To <u>12</u> / <u>31</u> / <u>2020</u> Report Type: <u>20M1</u> 2   |
| ☑ Original ☐ Amendment ☐  | Special Election Report   |
| (6) Contributions This Report   | (7) Expenditures This Report  |
| Cash & Checks \$,,,000  | Monetary  |
| Loans \$,,,000  | Transfers to Office Account \$ , , , 0 . 00   |
| Total Monetary \$   | Total Monetary \$ , , _10 . 00  |
|   | (8) Other Distributions \$ , , 000  |
| (9) TOTAL Monetary Contributions To Date \$, _211, _20000   | (10) TOTAL Monetary Expenditures To Date \$, _126_, _76768_   |
|   | (Type name)   |
| X   | X   |
| Signature   | Signature   |

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

| (1) Name                  | Com. Supporting Vo   | ters'      | Wishes Or                | ver Public           | 2) d.D. Numbe          | r1             | 408    |
|---------------------------|--|------------|--------------------------|----------------------|------------------------|----------------|--------|
|                           | 12/1/2020  |            | 1                        | 2/31/2020            |                        |                |        |
| (3) Cover Perio           | od / /   | thro       | ough                     | <i>I I</i>           | (4) Pag                | e <sup>l</sup> | of     |
| (5)<br>Date               | (7)<br>Full Name   |            | (8)                      | (9)                  | (10)                   | (11)           | (12)   |
| (6)<br>Sequence<br>Number | (Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Co<br>Type | ontributor<br>Occupation | Contribution<br>Type | In-kind<br>Description | Amendment      | Amount |
|                           | ***  |            |                          | 3.470                |                        |                |        |
| 1 1                       |  |            |                          |                      |                        |                |        |
| <i>f</i> 1                |  |            |                          |                      |                        |                |        |
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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     | Com. | Supporting | Voters' | Wishes | Over  | Public | Land(2) I.D. Num | nber _ | 1  | L408 |  |
|--------------|------|------------|---------|--------|-------|--------|------------------|--------|----|------|--|
|              |      | 12/1/2020  |         | 12/    | 31/20 | 20     |                  |        |    |      |  |
| (3) Cover Pe | riod | I $I$      | throu   | ıah    | 1     | 1      | (4) Page         | 1      | of | 1    |  |

| (5)                      | (7)   | (8)   | (9)                 | (10)      | (11)    |
|--------------------------|---|---|---------------------|-----------|---------|
| Date (6) Sequence Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount  |
| 12/31/2020               | 2295 GALIANO ST   | bank fees   | MO                  |           | \$10.00 |
| 1                        | CORAL GABLES, FL 33134  |   |                     |           |         |
|                          |   |   |                     |           |         |
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| DS-DE 14 (Rev.           | 11/13 \   |   |                     |           |         |