CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) People for Proven Leadership	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1241324]							
(2) 800 Brickell Avenue; Suite 900	Submitted on:							
Address (number and street) Miami, FL 33131	1/8/2021 12:16:17 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number:1422							
_								
 (4) Check appropriate box(es): Candidate Office Sought: 								
Candidate Onice Sought. <u>X</u> Political Committee (PC)	· · · · · · · · · · · · · · · · · · ·							
Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
	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) Report Identifiers								
Cover Period: From $12 / 1 / 2020$ To	<u>12</u> / <u>31</u> / <u>2020</u> Report Type: <u>20M12</u>							
☑ Original ☐ Amendment ☐ Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , , 0 . 00	Expenditures \$,, 595 . 00							
¢ 0.00								
Loans \$,, <u>0</u> .00	Transfers to Office Account \$							
Total Monetary \$, , 0.00	Office Account \$,, 0 . 00							
	Total Monetary \$, ,595.00							
In-Kind \$,,0.00	, <u>, , , , , , , , , , , , , , , , , , </u>							
	(8) Other Distributions							
	\$, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>256</u> , <u>000</u> . <u>00</u>	\$, <u>226</u> , <u>978</u> . <u>58</u>							
(11) Cer	tification							
	son to falsify a public record (ss. 839.13, F.S.)							
I certify that I have examined this report and it is true, cor	rect, 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	Name (2) I.D. Number14					22	
	12/1/2020		1	2/31/2020			
(3) Cover Perio	od / /	thro	bugh	<i>ll</i>	(4) Page	e <u> </u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	ACCULTURE AND ADDRESS ADDR	Туре	Description	Amendment	Amount
,	n - Hurde - Ma			0.010			
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	CAMPAIGN TREASURER ple for Proven Leadershi	p	D EXPENDIT (2) I.D. Number		1422
(3) Cover Period	12/1/2020 1/ through_	12/31/2020 //	(4) Page <u>1</u>	of	1
(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
12/22/2020 1	Anthony Brunson P.A., 3350 SW 148th Avenue Suite 110 Miramar, FL 33027	campaign accounting services	MO		\$595.00
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