CAMPAIGN TREASURER'S REPORT SUMMARY											
(1)	Vote Yes For a Better Miami Name	OFFICE USE ONLY ONLINE SUBMISSION									
(2)	PO BOX 452112	[1231265]									
	Address (number and street)	Submitted on:									
	Miami, FL 33245	9/18/2020 15:09:26 (eastern)									
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number: 2213									
(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 PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed										
	(5) Report	Identifiers									
	er Period: From 8 / 29 / 2020 To	9 / <u>11</u> / <u>2020</u> Report Type: <u>20G2</u>									
X O	riginal Amendment Spo	ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Casl	n & Checks \$, , 000	Monetary									
Loar		Transfers to Office Account \$, , , 0 . 00									
Tota	I Monetary \$, , , 000	Total Manadama (0)									
In-Ki	and \$,, <u>0</u> .00	Total Monetary \$, , _24 . 00									
		(8) Other Distributions \$, , 0 00_									
(9)	TOTAL Monetary Contributions To Date \$,46 ,00000	(10) TOTAL Monetary Expenditures To Date \$,45 ,88181									
(T)	(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, correct, and complete: (Type name) Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)										
X	gnature	X Signature									
2	unaiure	ı əlunalure									

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Vote Yes For a Bet	ter M	iami		2) I.D. Numbe	er <u> </u>	213
	8/29/2020		9	/11/2020			
(3) Cover Perio	od//	thro	ough	<i>l l</i>	(4) Pag	e	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
	-10 G		**	0.512	21		
1 1							
			6				
F 1							
1 1							
1 1							
			-				
1 1							
<i>I</i> 1							
1 1							
J I							
		7	·			•	
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	ote	Yes	For	a	Better Miam	i				 (2) I.D. Nun	nber	*		2213	-
		8/2	9/20	20		9	9/11/2	202)						
(3) Cover Peri	od		I	1	through		1		1	(4) Page	1		of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
8/31/2020	REGIONS, 3516 MAIN HIGHWAY	bank fees	MO		\$24.00
1	COCONUT GROVE, FL 33133				
//					
//					
//					
//					
//					
//					
//					
DS-DE 14 (Rev.	44(40.1)				