	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Our Democracy	OFFICE USE ONLY							
` ,	Name	ONLINE SUBMISSION							
(2)	1742 West Flagler Street	[1299168]							
	Address (number and street)	Submitted on:							
	Miami, FL 33135	8/18/2023 12:42:36 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:2238							
(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 PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
	(5) Report	Identifiers							
Cove	er Period: From 5 / 1 / 2023 To	5 / 31 / 2023 Report Type: 23M05							
□ 0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casł	h & Checks \$, , 000	Monetary							
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , , 0 . 00	Total Monetary \$, , 0 . 00							
In-Ki	ind \$,8, <u>122</u> . <u>42</u>								
		(8) Other Distributions \$, , 000							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$ <u>8</u> , <u>026</u> , <u>776</u> . <u>62</u>	\$ <u>6</u> , <u>570</u> , <u>329</u> . <u>32</u>							
Ιc	(11) Cert It is a first degree misdemeanor for any pers certify that I have examined this report and it is true, corr	, , ,							
(T	ype name)	(Type name)							
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Our Democracy		(2) I.D. Number				
	5/1/2023			/31/2023			
(3) Cover Perio	od//	thro			(4) Page	a 1	of ¹
VI.20 EV			1995				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
5/24/2023	Fernandez, Miguel		healthcare	IK	1	Add	\$8,122.4
1 1	1 Arvida Parkway Coral Gables, FL 33156		ceo		event expenses		
1							
1							
1							
1 1							
1							
36 L							
.7 3							
1 1							
						,	
x a							
J I							
6			in the second se				
1 1							
1 1							
			I .	l .	1		

DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

1) Name <u>Our I</u>	Democracy		PORT – ITEMIZED EXPENDIT (2) I.D. Number		
3) Cover Period _	5/1/2023 5/3 <i>I</i> through	1/2023	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)	(11)
//					
//					
//					
//					
//					
//					
//					
				2 4	