CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Improve Miami	OFFICE USE ONLY						
` '	Name	ONLINE SUBMISSION						
(2)	3900 SW 26th Street	Submitted on:						
	Address (number and street)	4/8/2020 15:09:42 (eastern)						
	West Park, FL 33023  City, State, Zip Code							
		(2) ID Noveley						
	Check here if address has changed	(3) ID Number: 2250						
(4)	Check appropriate box(es):							
	Candidate Office Sought:							
	<ul><li>☐ Political Committee (PC)</li><li>☑ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded						
	☐ Party Executive Committee (PTY)	☐ 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 $\frac{3}{2}$ / $\frac{1}{2}$ / $\frac{2020}{20}$ To	3 / 31 / 2020 Report Type: 20M03						
X O	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	n & Checks \$ , , 0 . 00	Expenditures \$ , , 0 . 00						
	Φ 0.00							
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
T-4-	1 Manatani	Office Account \$ , , , 0 . 00						
rota	I Monetary \$ , , 0 . 00	Total Monetary \$ . 0 . 00						
I. IZ:	nd \$ , , 0.00	Total Monetary \$ , , , 0 . 00						
In-Ki	nd	(8) Other Distributions						
		(8) Other Distributions \$ , , 0 00_						
		, <u> </u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$ , , <u>163</u> . <u>63</u>						
	(44) 0	(16. 4)						
		tification on to falsify a public record (ss. 839.13, F.S.)						
Ιc	ertify that I have examined this report and it is true, corr	ect. and complete:						
		1						
<u> </u>	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	gnature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Improve Miami				2) I.D. Numbe	er	2250
	3/31/2020						
(3) Cover Perio	od/	through		111	(4) Pag	e <sup>1</sup>	of <sup>0</sup>
			-	37 9			
(5)	(7)	(8)		(9)	(10)	(11)	(12)
Date	Full Name					X32 122	
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Contrib	outor	Contribution	In-kind		
Number	City, State, Zip Code		cupation	Туре	Description	Amendment	Amount
30	300		*		\$*************************************		
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(1) Name Impro	CAMPAIGN TREASURER'S REPORT - ITEMIZE Improve Miami				(2) I.D. Number			
(3) Cover Period _	3/1/2020	through	31/2020 	(4) Page1	of	0		
(5) Date (6) Sequence Number	(7) Full Na (Last, Suffix, F Street Add City, State,	ame irst, Middle) dress &	(8) Purpose (add office sought contribution to a candidate)	(9) if Expenditure Type	(10)	(11) Amount		
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