CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Invest in Our Community	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1248843]							
(2) 2600 South Douglas Road; Suite 900	Submitted on:							
Address (number and street) Coral Gables, FL 33134	9/3/2021 16:36:43 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 2461							
(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) 								
(5) Report Identifiers								
Cover Period: From <u>8</u> / <u>1</u> / <u>2021</u> T	o 8 / 31 / 2021 Report Type: 21M08							
☐ Original	Special Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$, , , 000	Monetary Expenditures \$,, 25 . 00							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,000							
Total Monetary \$	Total Monetary \$,, 25 . 00							
······································	(8) Other Distributions							
	\$,, 00							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>55</u> , <u>000</u> . <u>00</u>	\$, <u>54</u> , <u>680</u> . <u>00</u>							
(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, ca	prrect, and complete:							
(Type name)	(Type name)							
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
x	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	ne (2) I.D. Number					er2	2461	
				8/31/2021				
(3) Cover Perio	/ bd	thro	ough	II	(4) Pag	e _1	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6)	(Last, Suffix, First, Middle)			_				
Sequence Number	Street Address & City, State, Zip Code	Со Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
Transer		Турс	occupation	Type	Description		, intoune	
1 1								
	-							
1 1	-							
1 1	-							
1 1	-							
1 1	-							
1 1								
		5				5		
1 1								
			0			2		
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name	CAMPAIGN TREASURER' est in Our Community		D EXPENDIT (2) I.D. Number		2461
(3) Cover Period	8/1/2021 / / through	8/31/2021	(4) Page <u>1</u>	of_	1
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	contribution to a	Expenditure	(10)	(11)
Number	City, State, Zip Code	candidate)	Туре	Amendment	Amount
	CITY NATIONAL BANK, 8411 SW 40 STREET MIAMI, FL 33155	bank fee	MO		\$25.00
_/ /					
_ / /					
_ / /					
_ / /					
_ / /					
11					
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES