CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Miami Dade District 2 United	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	929 NE 199th Street; Unit 202	Submitted on:						
	Address (number and street)	8/2/2024 19:20:38 (eastern)						
	North Miami Beach, FL 33179  City, State, Zip Code	— I						
		(2) ID Number: 2465						
(4)	Check here if address has changed	(3) ID Number: 2465						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐							
	☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded						
	Party Executive Committee (PTY)	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						
Cove	er Period: From $\frac{7}{20}$ / $\frac{20}{2024}$ To	7 / 26 / 2024 Report Type: 24P5						
X O	riginal Amendment Spo	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	h & Checks \$,, <u>300</u> . <u>00</u>	Monetary						
Loar	s , , ,000	Transfers to Office Account \$ , , 0 . 00						
Tota	I Monetary \$ , , 300 . 00							
		Total Monetary \$ , , 250 . 00						
In-Ki	ind \$ , , <u>0</u> . <u>00</u>							
		(8) Other Distributions \$ , , 000						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$						
(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:								
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		X						
	gnature	Signature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Miami Dade Distric	t 2 United		2) I.D. Numbe	er	465
	7/20/2024		7/26/2024			-
(3) Cover Perio	od / /	through	_ 1 1	(4) Pag	je	of
-		P		Г	1	
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		•
Number	City, State, Zip Code	Type Occupation I education		Description	Amendment	Amount \$300.0
7/24/2024	Lawrence , David Jr 2800 Toledo St	I educatio advocate				\$300.0
1 1	Coral Gables, FL 33134	advocace				
1						
1						
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1 1						
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1						
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1 1						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Miami	Dade	Distri	ict 2 Unite	ed		 (2) I.D. Nur	nber		2465	-
		7/20/	2024		7/26/2	024					
(3) Cover Per	riod	1	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
7/24/2024	Tele Pam, 15490 NW 7 Ave Suite 102 Miami, FL 33169	advertising	MO		\$250.00
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