CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Philippe Bien-Aime	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	70 NE 134 St.	Submitted on:						
	Address (number and street) North Miami, FL 33161	3/10/2022 16:02:35 (eastern)						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 2504						
(4)	Check appropriate box(es):							
	 ☐ Candidate Office Sought: County Commission District 02 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ 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	dentifiers						
Cov	er Period: From <u>2</u> / <u>1</u> / <u>2022</u> To							
X O	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	n & Checks \$,1 , <u>950</u> . <u>00</u>	Monetary						
Loar		Transfers to Office Account \$, , , 0 . 00						
Tota	I Monetary \$, 1 , <u>950</u> . <u>00</u>	Total Monetary \$. 0 . 00						
In-Ki	ind \$, , 0.00	Total Monetary \$, , , 0 . 00						
		(8) Other Distributions \$, , 000_						
(9)	TOTAL Monetary Contributions To Date \$,56 ,11500	(10) TOTAL Monetary Expenditures To Date \$, , 000						
(T		tification on to falsify a public record (ss. 839.13, F.S.) rect, and complete: (Type name) Candidate Chairperson (only for PC and PTY)						
<u>X</u>		<u>X</u>						
Si	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _{Ph}		(2		2504					
	2/1/202	2		2/28/	2022				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of $\frac{1}{}$	

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
2/3/2022	BOOK, RONALD L. 18851 NE 29TH AVE. STE 1010 AVENTURA, FL 33180	Ĭ	pa	СН			\$1,000.0
2/15/2022	GOUSSE, NADINE ***Protected Voter***	I	x	СН			\$150.0
2/15/2022 / / /	N. MIAMI HOLISTIC WELLNESS CEN, 14880 SW 180TH STREET MIAMI, FL 33187	I	x	СН			\$200.0
2/23/2022	Lumana Physical Therapy & Well, 810 NE 125th St N Miami, FL 33161	В	physical therapy	СН			\$100.0
2/23/2022	Joseph, Lumana 320 NE 129th St N. Miami, FL 33161	I	physical therapist	СН			\$500.0
J I							
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) Name Philip	2/1/2022	2/	28/2022	 I.D. Number Page1 		0
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(5) Date (6) Sequence Number	(7 Full N (Last, Suffix, Street Ac City, State	lame First, Middle) Idress &	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)
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SS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES								