CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Willis Howard Name	OFFICE USE ONLY ONLINE SUBMISSION							
(2)	P.O. Box 4235	[1315514]							
	Address (number and street)	Submitted on:							
	Miami, FL 33014	7/7/2024 21:42:11 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:2660							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: Supervisor of Elections ☐ 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							
	er Period: From 6 / 15 / 2024 To	6 / 28 / 2024 Report Type: 24P2							
× O	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , 0 . 00	Monetary Expenditures \$,5 , 500 . 00							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , , 000	Total Monetary \$, 5 ,500 . 00							
In-Ki	ind \$,,,000								
		(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$,65,04000_								
(T	(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: (Type name) Individual (only for IE Deputy Treasurer								
X		<u>X</u>							
Si	gnature	Signature I							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Willis Howard				2) I.D. Numbe	r2	660
	6/15/2024		6	/28/2024			
(3) Cover Perio	od//	thro	ough	<i>l l</i>	(4) Page	a	of
VC)	(7)		(0)	(0)	(40)	(4.4)	(40)
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
						3	
1 1							
301							
,							
1 1							
1 1							
1							
1 1							
1 1							
1 1							
2							
,							
1 1							

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

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Will	is	Howar	d				 (2) I.D. Nun	nber	2	2660	
	6	/15/2	024		6/28/20	024					
(3) Cover Period	t	1	1	through	1	1	(4) Page	1	of	1	

(5) Date	(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
6/27/2024	Abs Printing, 20404 NE 15th ct miami , fl 33179	direct mail/ printing	MO		\$5,500.00
1	11111111 / 11 331/3				
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