	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Guardians of Miami Beach	OFFICE USE ONLY					
•	Name	ONLINE SUBMISSION [1150119]					
(2)	2618 Centennial Place	Submitted on:					
	Address (number and street)	3/5/2018 09:09:44 (eastern)					
	Tallahassee, FL 32308						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:30					
(4)	Check appropriate box(es):						
	Candidate Office Sought:						
	☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Check here if PC or ECO has disbanded						
	 ☑ Electioneering Communications Org. (ECO) ☐ Check here if PC or ECO has disbanded ☐ 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	dentifiers					
Cove	er Period: From $2 / 1 / 2018$ To						
		ecial Election Report					
		T					
(0)	Contributions This Report	(7) Expenditures This Report					
Cack	n & Checks \$, , 0 . 00	Monetary Expenditures \$, , 0 . 00					
Casi	1 & Checks						
Loar	ns \$, , 0.00	Transfers to					
		Office Account \$, , 0 . 00					
Tota	I Monetary \$, , 0 . 00						
		tary \$,, <u>0</u> . <u>00</u> Total Monetary \$, <u>0</u> . <u>00</u>					
In-Ki	nd \$,,, <u>0</u> . <u>00</u>						
		(8) Other Distributions					
		\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, <u>0</u> <u>00</u>	\$, , <u>0</u> . <u>00</u>					
	(11) Cert It is a first degree misdemeanor for any pers						
1	-						
ΙC	certify that I have examined this report and it is true, com	ect, and complete:					
_(T)	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Guardians of Miami Beach (2) I.D. Number 30								
	2/1/2018		2/28/2018					
(3) Cover Perio	od / /	throu	ıgh	1 1	(4) Pag	e ¹	of ⁰	
			1007					
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name				. ,	2000 300		
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &	Con	tributor	Contribution	In-kind			
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount	
01401 1996 06 1991 970 1998 9000 11	Constituting a management of the constitution		A company of the comp	21-23 C	An index or department of the control of the contro		200 - 300 miles 190 y 0 200 0 miles 200 0 0	
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J I								
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10 St								
3								
1 1								

C (1) Name ^{Guard}	AMPAIGN TREASURER'S R			EXPENDITURES 1.D. Number 30		
		28/2018	1) Page1		0	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)	
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