CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Guardians of Miami Beach	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1244000]						
(2) <u>2618 Centennial Place</u>	Submitted on:						
Address (number and street) Tallahassee, FL 32308	3/1/2021 09:24:31 (eastern)						
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						
	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							
Cover Period: From 2 / 1 / 2021 To	2 / <u>28</u> / <u>2021</u> Report Type: <u>M2</u>						
Original Amendment Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$ , , , 0 . 00	Expenditures \$,,,						
Loans \$,, 0.00	Transfers to						
	Office Account \$,,0 . 00						
Total Monetary \$,,,0 00							
<b>A</b>	Total Monetary \$,,,,						
In-Kind \$,, <u>0</u> .00							
	(8) Other Distributions \$ , , 000						
	, <u></u> <u></u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>0</u> . <u>00</u>	\$,, <u>   00</u> . <u> 00</u>						
(11) Cer	l tification						
	on 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)	(Type name)						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	X						
Signature	Signature						

DS-DE 12 (Rev. 11/13)

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Guardians of Miami	h	(2) I.D. Number				
	2/1/2021		2	/28/2021		1	0
(3) Cover Perio	od/ /	thro	bugh	11	(4) Page	e	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
1							
1 1	_						
1 1	-						
1 1	_						
<i>f I</i>	-						
1 1	-						
/ /							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name <u>Guardians of Miami Beach</u> (2) I.D. Number <u>30</u>								
	2/1/2021 /through	2/28/2021	4) Page <u>1</u>		0			
(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			
_/ /								
_/ /								
_/ /								
11								
//								
11								
11								
_/ /								

DS-DE 14 (Rev. 11/13)

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