CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Guardians of Miami Beach	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1194790]							
(2) <u>2618 Centennial Place</u>	Submitted on:							
Address (number and street) Tallahassee, FL 32308	11/12/2019 10:30:33 (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) Party Executive Committee (PTY)	☐ 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 Identifiers								
Cover Period: From <u>11</u> / <u>1</u> / <u>201</u> 9 To	<u>11</u> / <u>1</u> / <u>2019</u> Report Type: <u>R01</u>							
☐ Original	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , , 0 . 00	Expenditures \$, , , 00							
Loans \$,,_0.00	Transfers to							
	Office Account \$,,0.00							
Total Monetary \$, , 0.00								
	Total Monetary \$, , 0 . 00							
In-Kind \$,,								
	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, <u>0 . 00 </u>	\$,,000							
(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) (Type name)								
Individual (only for IE I Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
or electioneering comm.)								
X	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name <u>Guardians of Miami Beach</u> (2) I.D. Number					r3	30	
	11/1/2019		1	1/1/2019		7	0	
(3) Cover Perio	od / /	thro	ough	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 1	_							
1 1	-							
1 1								
/ /								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Guar	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES I) Name Guardians of Miami Beach (2) I.D. Number 30							
(3) Cover Period	11/1/2019 /through	11/1/2019 //	4) Page <u>1</u>	of	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) Amendment	(11) Amount			
//								
//								
_/ /								
11								
//								
11								
11								
11								

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES