| | CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|
| (1) | Citizens for a Safe Miami Beach Name 1020 Ocean Drive | OFFICE USE ONLY ONLINE SUBMISSION [1193756] | | | | | | | |
| (2) | Address (number and street) Miami Beach, FL 33139 City, State, Zip Code | Submitted on: 10/31/2019 18:40:46 (eastern) | | | | | | | |
| | ☐ Check here if address has changed | (3) ID Number: 31 | | | | | | | |
| (4) | | | | | | | | | |
| (5) Report Identifiers | | | | | | | | | |
| Cover Period: From 9 / 1 / 2019 To 10 / 4 / 2019 Report Type: G01 Original Amendment Special Election Report | | | | | | | | | |
| (6) | Contributions This Report | (7) Expenditures This Report | | | | | | | |
| | n & Checks \$,,,,000 | Monetary | | | | | | | |
| Loar Tota | \$ | Transfers to Office Account \$, , , 0 . 00 | | | | | | | |
| In-Ki | nd \$,, <u>0</u> . <u>00</u> | Total Monetary \$, , , 00 | | | | | | | |
| | | (8) Other Distributions \$, , 000_ | | | | | | | |
| (9) | TOTAL Monetary Contributions To Date \$ | (10) TOTAL Monetary Expenditures To Date \$, _801 , _01592 | | | | | | | |
| <u>(T</u> | (11) Cert It is a first degree misdemeanor for any pers ertify that I have examined this report and it is true, corr ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.) | , , , | | | | | | | |
| <u>X</u> | | X | | | | | | | |
| Sig | gnature | Signature | | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| Date Full Name (6) (Last, Suffix, First, Middle) Sequence Street Address & Contributor Contribution In-kind | 125 |
|---|-------|
| Date (6) (Cast, Suffix, First, Middle) Sequence Number City, State, Zip Code Contributor Contribution Type Contribution Type Contribution Type Description Amendment A | 0 |
| Sequence Street Address & Contributor Contribution In-kind Description Number City, State, Zip Code Type Occupation Type Description Amendment A | (12) |
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name | Citizens | for a | a Safe | Miami | Beach | (2) I.D. Number | | 31 | |
|--------------|----------|-------|--------|---------|-----------|---|----|----|--|
| | 9/1 | /2019 |) | | 10/4/2019 | ~ | | | |
| (3) Cover Pe | riod | I | 1 | through | 1 / / | (4) Page 1 | of | 1 | |

| (5) | (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 |
| 9/16/2019 | CITY NATIONAL BANK , 300 71ST STREET MIAMI BEACH , FL 33141 | bank fee | MO | Add | \$-20.00 |
| 1 | MIANI BEACH , FL 33141 | | | | |
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