| CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| (1) Citizens for a Safe Miami Beach | OFFICE USE ONLY | | | | | | | |
| Name | ONLINE SUBMISSION [1185478] | | | | | | | |
| (2) 1020 Ocean Drive | Submitted on: | | | | | | | |
| Address (number and street) Miami Beach, FL 33139 | 3/7/2019 15:17:27 (eastern) | | | | | | | |
| City, State, Zip Code | | | | | | | | |
| Check here if address has changed | (3) ID Number:31 | | | | | | | |
| (4) Check appropriate box(es): | | | | | | | | |
| Candidate Office Sought: | | | | | | | | |
| ☑ Political Committee (PC) | Charle have \$200 as 500 has disharded | | | | | | | |
| | 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>2</u> / <u>1</u> / <u>2019</u> To | 2/ 28/ 2019 Report Type:M02 | | | | | | | |
| ☐ Original | | | | | | | | |
| (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 \$, , 20.00 | | | | | | | |
| In-Kind \$,, <u>0</u> .00 | | | | | | | | |
| | (8) Other Distributions | | | | | | | |
| | \$,, 00 | | | | | | | |
| (9) TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date | | | | | | | |
| \$, <u>801</u> , <u>008</u> . <u>00</u> | \$, 800 , 915 . 92 | | | | | | | |
| | | | | | | | | |
| (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 Treasurer Deputy Treasurer | Candidate Chairperson (only for PC and PTY) | | | | | | | |
| or electioneering comm.) | | | | | | | | |
| _X | x | | | | | | | |
| Signature | Signature | | | | | | | |

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name | <u>Citizens for a Safe Miami Beach</u> (2) I.D. Number 31 | | | | | | |
|--------------------|---|------|------------|--------------|-------------|-----------|--------|
| | 2/1/2019 | | | /28/2019 | | | |
| (3) Cover Peri | od / / | thro | ough | <i>ll</i> | (4) Pag | e | of |
| (5) Date (6) | (7) Full Name (Last, Suffix, First, Middle) | | (8) | (9) | (10) | (11) | (12) |
| Sequence | Street Address & | C | ontributor | Contribution | In-kind | | |
| Number | City, State, Zip Code | | Occupation | Туре | Description | Amendment | Amount |
| 1 1 | | | | | | | |
| 1 1 | | | | | | | |
| 1 1 | - | | | | | | |
| 1 1 | | | | | | | |
| 1 1 | | | | | | | |
| 1 1 | | | | | | | |
| 1 1 | | | | | | | |
| 1 1 | | | | | | | |

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

| (1) Name Cit | CAMPAIGN TREASURER' izens for a Safe Miami B | each (| | EXPENDITURES) I.D. Number 31 | | |
|--|--|--|----------------------------|----------------------------------|----------------|--|
| (3) Cover Period | 2/1/2019 I/through_ | 2/28/2019 // | 4) Page <u>1</u> | of | 1 | |
| (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 | |
| | CITY NATIONAL BANK , 300 71ST STREET MIAMI BEACH, FL 33141 | bank fee | МО | | \$20.00 | |
| _/ / | | | | | | |
| _/ / | | | | | | |
| _/ / | | | | | | |
| _/_/ | | | | | | |
| _/ / | | | | | | |
| | | | | | | |
| _/ / | | | | | | |

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES