

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Citizens for a Safe Miami Beach

Name

(2) 1020 Ocean Drive

Address (number and street)

Miami Beach, FL 33139

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 31

OFFICE USE ONLY

ONLINE SUBMISSION

[1224703]

Submitted on:

8/12/2020 10:18:58 (eastern)

(4) Check appropriate box(es):

☐ Candidate Office Sought: _____

☒ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☒ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 7 / 1 / 2020 To 7 / 31 / 2020 Report Type: M7

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 0 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 61 . 80

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 61 . 80

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 801 , 238 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 801 , 238 . 00

(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)

☐ Individual (only for IE or electioneering comm.) ☐ Treasurer ☐ Deputy Treasurer

X

Signature

(Type name)

☐ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Citizens for a Safe Miami Beach (2) I.D. Number 31
7/1/2020 7/31/2020
 (3) Cover Period / / through / / (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Citizens for a Safe Miami Beach

(2) I.D. Number 31

(3) Cover Period 7/1/2020 through 7/31/2020

(4) Page 1 of 1

(5) Date	(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
7/9/2020 //	VELASCO, CECILIA 1523 EUCLID AVENUE APT 8 MIAMI BEACH, FL 33139	outreach	MO		\$61.80
1					
//					
//					
//					
//					
//					
//					