CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Citizens for a Safe Miami Beach	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	1688 Meridian Avenue; Suites 600-700 6	5th Floor [1200434] Submitted on:							
	Address (number and street)	5/5/2022 15:08:40 (eastern)							
	Miami Beach, FL 33139								
	City, State, Zip Code	(2) ID Novelean							
	Check here if address has changed	(3) ID Number:80							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐								
	☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded							
	Party Executive Committee (PTY)	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							
Cove	er Period: From 10 / 16 / 2021 To	10 / 28 / 2021 Report Type: G3							
	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$,,,	Monetary							
Loar	s , , , ,	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , , 000								
In-Ki	ind \$, , 0.00	Total Monetary \$, , , 80							
III-IXI	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions							
		\$, , 000							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$ <u>1</u> , <u>240</u> , <u>000</u> . <u>00</u>	\$ <u>1</u> , <u>141</u> , <u>518</u> . <u>66</u>							
(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:									
	ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Citizens for a Saf	e Mia	mi Beach		2) I.D. Numbe	er8	30
(3) Cover Peri	10/16/2021 od///	thro	1 ough	0/28/2021 //	(4) Pag	je <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution	In-kind Description	Amendment	Amount
Number	City, State, Zip Code	туре	Occupation	Туре	Description	Amendment	Amount
1 1							
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I I							
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1 1							
1 1							
1 1							

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Citizens	for	a Safe	Miami	Beach	- X	(2) I.D. Numl	ber	8	0	
	10,	/16/2	021		10/28/2	021					
(3) Cover Per	riod	1	1	through	ı /	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
10/27/2021	Premsa, Inc., 4429 NW 97th Place Doral, FL 33178	translation services	МО	Delete	\$136.80
1					
10/27/2021	Premsa, Inc., 4429 NW 97th Place Doral, FL 33178	translation services	МО	Add	\$136.00
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