CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Residents for a Safer, Cleaner Miami								
	Name	ONLINE SUBMISSION							
(2)	820 W. 41st Street; Ste. 209	Submitted on:							
	Address (number and street)	2/17/2022 11:35:36 (eastern)							
	Miami Beach, FL 33140  City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 89							
(4)	_	(b) 12 Ivanical.							
(+)	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							
Cove	er Period: From 10 / 30 / 2021 To								
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	Monetary								
Loar		Transfers to Office Account \$ , , , 0 . 00							
Tota In-Ki	I Monetary \$,,,0	Total Monetary \$ ,1 , 101 . 79							
		(8) Other Distributions \$ , , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$ , 5 ,00000								
(T	(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								
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Residents for a Sa	fer, Cleaner M	iami Beach	2) I.D. Numbe	er8	19
(3) Cover Perio	10/30/2021 od///		1/11/2021 //	(4) Pag	je <u>1</u>	of _0
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1						
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1 1						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Residents	for a	a Safer,	Cleaner	Miami	Beach	(2) I.	D. Numb	er	8	9	200
	10/3	30/202	21	11,	/11/20:	21						
(3) Cover Pe	eriod /	8	thre	ouah	1	1	(4) P	age	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
11/2/2021	Mary, Luidgi 1631 Meridian ave MIami Beach, Fl 33139	marketing	МО	Add	\$800.00
1					
11/2/2021	TD Bank, 930 W 41th st Miami Beach, FL 33141	bank fees	МО	Add	\$43.50
11/2/2021	TD bank, 930 W 41th St MIami Beach, Fl 33141	atm fee	МО	Add	\$3.00
11/8/2021	Aroma Market & Catering, 8819 Stirling Rd Cooper City, FL 33328	catering	MO	Add	\$174.18
4					
11/4/2021	Sergio Restaurant, 3122 SW Coral way Coral Gables, FL 33127	catering	МО	Add	\$81.11
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DS DE 14 (Pay					