CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Ricky Garcia	OFFICE USE ONLY ONLINE SUBMISSION						
'8 \	Name	[1235571]						
(2)	P O Box 1225	Submitted on:						
	Address (number and street) LaBelle, FL 33975	10/22/2020 09:33:18 (eastern)						
	City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 143						
(4)	Check appropriate box(es):							
(")	☐ Candidate Office Sought: Sheriff							
	Political Committee (PC)							
	☐ 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	dentifiers						
Cove	er Period: From <u>10</u> / <u>10</u> / <u>2020</u> To	10 / 16 / 2020 Report Type: <u>G6</u>						
X O	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
	1	Monetary						
Casl	h & Checks \$, , ,000	Expenditures \$, , 0 . 00						
er	Φ 0.00							
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$						
	• 0 00	Office Account \$, , , 0 . 00						
Tota	al Monetary \$, , 0 . <u>00</u>	Total Manatani, d						
	• 1 000 00	Total Monetary \$, , 0 . 00						
In-Ki	ind \$,1 ,							
	!	(8) Other Distributions						
_		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>3</u> , <u>100</u> . <u>00</u>	\$,2,58600_						
(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:								
(T	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		X						
Si	ignature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Ricky Garcia				(2) I.D. Number143					
	10/10/2	020		10/16	5/2020				
(3) Cover Period	*	1	through	1	1	(4) Page	1	of $\frac{1}{}$	

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(5) (7) Date Full Name		(8)		(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
10/10/2020	Brown, Faye 704 Harlem Gardens Clewiston, FL 33440	I	homemaker	IK	meet & greet		\$500.0
1							
10/10/2020	Horace, Mary Jane 1019 Harlem Gardens Clewiston, FL 33440	I	diner owner	IK	meet & greet		\$200.0
2							
10/10/2020	Horace, Thomas 1019 Harlem Gardens Clewiston, Fl 33440	I	diner owner	IK	meet& greet		\$300.0
3							
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1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Ricky Garcia (2) I.D. Number 143									
(3) Cover Period	10/10/2020 /through	10/16/2020	(4) Page <u>1</u>	of	0				
(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)				
(6) Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount				
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