	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Committed to Homestead	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	406 Washington Avenue	Submitted on:								
	Address (number and street)	6/7/2021 09:19:46 (eastern)								
	Homestead, FL 33030									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 2282								
(4)	Check appropriate box(es):									
	Candidate Office Sought:									
	☒ 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								
		☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
	(5) Report	dentifiers								
Cove	er Period: From 5 $/1$ $/2021$ To									
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
• ,	•	Monetary								
Casl	h & Checks \$, 6,000.00	Expenditures \$, , 2 . 00								
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to								
		Office Account \$, , , 0 . 00								
Tota	I Monetary \$,6 , <u>000</u> . <u>00</u>	T. 114								
	•	Total Monetary \$, , 2 . 00								
In-Ki	ind \$,,, <u>0</u> . <u>00</u>									
		(8) Other Distributions								
		\$,, <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>86</u> , <u>000</u> . <u>00</u>	\$								
		tification on to falsify a public record (ss. 839.13, F.S.)								
م ا		, , ,								
10	certify that I have examined this report and it is true, corr	ect, and complete.								
	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		x								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	mmitted t	o Homes	stead		(2		2282		
	5/1/2023	1		5/31/	2021				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of ¹	

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
5/13/2021	Florida Value Partners 1 LP, 8100 Oak Lane Suite 300 Miami Lakes, FL 33016	В	constructi on				\$3,000.0
5/25/2021	Henry Bello Insurance Agency, 1490 West 68 Street Suite 204 Hialeah, FL 33014	В	insurance agent	СН			\$2,000.0
5/26/2021	CIP Group of Homestead LLC, 18610 NW 87 Ave. Suite 204 Hialeah , FL 33015	В	commercial property	. CH			\$1,000.0
I I							
I I							
f f							
1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Commit	ted to	Home	stead		9900 VIII 100	(2) I.D. Nu	mber		2282	200
		5/1/20	21		5/31/2	021					
(3) Cover Pe	riod	1	1	through	1	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
5/31/2021	CenterState Bank, 1550 N Krome Ave Homestead, FL 33030	account fee	MO		\$2.00
1	Homestead, FL 33030				
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