CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Robert Asencio	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	P.O. Box 941142	Submitted on:							
	Address (number and street) Miami, FL 33194	10/23/2020 11:37:10 (eastern)							
	City, State, Zip Code	<del></del>							
	Check here if address has changed	(3) ID Number: 2293							
(4)	Check appropriate box(es):								
	<ul> <li>☐ Candidate Office Sought: County Commission District 11</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>								
	(5) Report	Identifiers							
Cov	er Period: From 8 / 1 / 2020 To	8 / 13 / 2020 Report Type: 20P7							
	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , <u>500</u> . <u>00</u> Monetary Expenditures \$ , , <u>0</u> . <u>00</u>									
Loar		Transfers to Office Account \$ , , , 0 . 00							
Tota	I Monetary \$ , , <u>500</u> . <u>00</u>	Total Monetary \$ . 0 . 00							
In-Ki	ind \$ , , 0.00	Total Monetary \$ , , 0 . 00							
		(8) Other Distributions \$ , , 000_							
(9)	<b>TOTAL Monetary Contributions To Date</b> \$ ,30 , _31500	(10) TOTAL Monetary Expenditures To Date \$ ,15_ , _43541_							
(T		tification on to falsify a public record (ss. 839.13, F.S.) rect, and complete:  (Type name)  Candidate Chairperson (only for PC and PTY)							
<u>X</u>		<u>X</u>							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robert Asencio (2) I.D. Number						293	
8/1/2020			8/13/2020				
(3) Cover Peri	od//	thro	ough	<i>l l</i>	(4) Pag	je <u>1</u>	of
	×1	T		T			
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor '	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
8/12/2020	EMGAGE State PAC, 3425 US Highway 98 N	F	pc	CH		Add	\$500.0
1, 1, 1, 1	Lakeland, FL 33809						
1							
1							
1 1							
97							
1							
<i>i i</i>							
7 7							
1	-						
ř 2							
<i>J</i> 1	-						
		0					
1 1							
1 1							

C 1) Name Robert	EXPENDIT 2) I.D. Number				
	8/1/2020 8/ / / through	13/2020	) 1) Page <u>1</u>		0
(5) Date  (6) Sequence Number	(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)	(11) Amount
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