	CAMPAIGN TREASURE	R'S REPORT SUMMARY									
(1)	Juan Carlos Esquivel	OFFICE USE ONLY									
` ,	Name	ONLINE SUBMISSION									
(2)	9845 NW 25 Terrace	[1208675]									
	Address (number and street)	Submitted on:									
	Doral, FL 33172	6/6/2020 12:49:50 (eastern)									
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number:43									
(4)	Check appropriate box(es):										
	 ☐ Candidate Office Sought: Council Seat 3 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ 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 $5 / 1 / 2020$ To										
X O	riginal Amendment Spe	ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Cash	n & Checks \$,, 300 . 00	Monetary									
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , , 0 . 00									
Tota	Monetary \$,, 300 . 00	Total Monetary \$, , 12 . 60									
In-Ki	nd \$,1, _00000										
		(8) Other Distributions \$, , 000_									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$, <u>2</u> , <u>560</u> . <u>00</u>	\$, <u>658</u> . <u>90</u>									
<u>(T</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: (Type name) Individual (only for IE Deputy Treasurer										
Х		X									
Sig	gnature	Signature									

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _{J1}	uan Carlos	Esquive	21	(2) I.D. Number						
	5/1/202	0		5/31/	2020					
(3) Cover Period	1	1	through	7	7	(A) Page	1	of	1	

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
5/31/2020	Madrid, Giovanny Jose 9340 SW 170th Passage Miami, FL 33196	Ĩ	insurance sales	CH			\$200.00
5/31/2020	Garcia, Elizabeth 3308 Willow Springs Drive Mckinney, TX 75070	I	administra tor	€ CH			\$100.00
5/15/2020	SOCIAL HIVE AGENCY, 2048 N.W. Miami Court MIami, Fl 33127	В	distributo rs) IK	500 mini bottles of hand sanitizer		\$1,000.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name <u></u>	Juan	Carlos	Esquiv	rel		794 716 110	 (2) I.D. Nun	nber	4	43	200
		5/1/2	2020		5/31/2	020					
(3) Cover Po	eriod	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
5/31/2020	ANEDOT PLATFORM, 5555 Hiton Avenue 106 Boton Rouge, LA 70802	service charge/ donation platform	МО		\$12.60
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DS-DE 14 (Rev.	44(40.1)				