CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Josh Dieguez	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	7950 NW 155 Street; Suite 207	[1308583]								
	Address (number and street)	Submitted on:								
	Miami Lakes, FL 33016	6/7/2024 16:19:00 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:60								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: Mayor ☐ 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 $\underline{4}$ / $\underline{1}$ / $\underline{2024}$ To	4 / 30 / 2024 Report Type: M16								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$,1 , <u>250</u> . <u>00</u>	Monetary								
Loar	s , , , , 000	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$,1 , 250 . 00	Total Monetary \$, , 515 . 00								
In-Ki	nd \$,, <u>0</u> .00									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>40</u> , <u>104</u> . <u>04</u>	\$, <u>11</u> , <u>699</u> . <u>44</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) (Type name)										
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		X								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name			(2) I.D. Number						
	4/1/2024		4	/30/2024					
(3) Cover Perio	od , / /	thro	ough	<i>II</i>	(4) Pag	e <u>1</u>	of		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
4/10/2024 / /	LAKES RADIOLOGY, 14575 NW 77TH AVE 100/200 MIAMI LAKES, FL 33014-2547	В	imaging - healthcare	СН	·		\$1,000.0		
1									
4/14/2024 / /	ROSADO, MARIA 3340 SW 16 TERRACE MIAMI, FL 33145		administra tor at fiu	ı CH			\$250.0		
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DS-DE 13 (Rev. 11/1:	3)	SEE RE	EVERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES			

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Josh I	Dieguez					 (2) I.D. Nun	nber	6	50	
	4/1/202	24		4/30/20	24					
(3) Cover Period	1	1	through	1	1	 (4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
4/22/2024	OUR LADY OF THE LAKES, 15801 NW 67th Avenue MIAMI LAKES, FL 33014	event sponsorship	MO		\$515.00
1	MIANI BAKES, FE 33014				
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DS-DE 14 (Rev.	11/13 \				