CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Caneste Succe	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1198096]						
(2) 1310 South Federal Highway	Submitted on:						
Address (number and street)	1/13/2020 18:39:26 (eastern)						
Lake Worth, FL 33460							
City, State, Zip Code							
Check here if address has changed	(3) ID Number: <u>515</u>						
(4) Check appropriate box(es):							
Candidate Office Sought: <u>County Commis</u>	sioner, Dist. 7						
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 Identifiers							
Cover Period: From <u>12</u> / <u>1</u> / <u>201</u> 9 To	<u>12</u> / <u>31</u> / <u>2019</u> Report Type: <u>M12</u>						
🗌 Original 🛛 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$, , , 0 . 00	Expenditures \$, , 0 . 00						
¢ 0.00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Total Monetary \$,,0.00	Office Account \$, , , 0 . 00						
Total Monetary \$,,,	Total Monetary \$, 0.00						
In-Kind \$,,0.00	Total Monetary \$, , , 0 . 00						
, <u>, , , , , , , , , , , , , , , , , , </u>	(8) Other Distributions						
	\$,,,000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>0</u> . <u>00</u>	\$,, <u>0</u> . <u>00</u>						
(11) Cor	L						
(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 Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)						
or electioneering comm.)							
x	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(2) I.D. Number								
12/1/2019			12/31/2019						
(3) Cover Perio	od / /	thro	ough	<i>II</i>	(4) Page	e	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
1 1	-								
1 1									
1 1	_								
1 1									
1 1	-								
1 1	_								
1 1	_								
/ /	_								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Canes	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name <u>Caneste Succe</u> (2) I.D. Number <u>515</u>								
	12/1/2019 12 <i>I</i> through	/31/2019	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				
_/ /									
_/ /									
_/ /									
_/ /									
_/ /									
_/ /									
11									

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES