	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Lee Moss	OFFICE USE ONLY ONLINE SUBMISSION					
	Name	[1300693]					
(2)	2225 Hwy 173	Submitted on:					
	Address (number and street)	10/12/2023 10:19:21 (eastern)					
	Bonifay, FL 32425 City, State, Zip Code						
	☐ Check here if address has changed	(3) ID Number: 162					
(4)		(3) ID Number:162					
(4)	Check appropriate box(es):	District 2					
		sioner, District 3					
		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					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cov	ver Period: From 9 / 1 / 2023 To						
		ecial Election Report					
		T					
(6)	Contributions This Report	(7) Expenditures This Report					
	*	Monetary					
Cas	sh & Checks \$, , <u>280</u> . <u>00</u>	Expenditures \$, , 0 . 00					
Lagr	\$ 0 00	Townstown to					
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$					
Tota	al Monetary \$, , 280 . 00	Office Account \$, , , 0 . 00					
TOla	al Monetary \$,, <u>280</u> . <u>00</u>	Total Monetary \$. 0 . 00					
i . jz	· · • • 0 00	Total Monetary \$, , , 0 . 00					
In-K	ind \$,, <u>0</u> .00						
		(8) Other Distributions					
		\$, , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, <u>280</u> 00	\$,,,000					
	3 /	tification					
	It is a first degree misdemeanor for any person						
I certify that I have examined this report and it is true, correct, and complete:							
(T	Гуре name)	(Type name)					
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
	,						
X	<u> </u>	<u>x</u>					
Si	ignature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Lee Moss	(2) I.D. Number							
9/1/2023		9/30/2023							
(3) Cover Perio	od//	thro	ough	11_	(4) Pag	e	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		
9/21/2023	MOSS, LEE V ***Protected Voter***		florida dot	СН	opened campaign account at people south bank in bonifay	Add	\$280.0		
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DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	S AND CODE VAL	.UES			

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Lee Moss (2) I.D. Number 162										
	9/1/2023 9/30 /through	/2023	4) 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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