|               | CAMPAIGN TREASURE  | CAMPAIGN TREASURER'S REPORT SUMMARY              |  |  |  |  |  |  |  |  |
|---------------|--|--|--|--|--|--|--|--|--|--|
| (1)           | Michael A Sumner   | OFFICE USE ONLY                                  |  |  |  |  |  |  |  |  |
|               | Name   | ONLINE SUBMISSION                                |  |  |  |  |  |  |  |  |
| (2)           | 256 SE 80th Avenue   | Submitted on:                                    |  |  |  |  |  |  |  |  |
|               | Address (number and street) Okeechobee, FL 34974   | 1/7/2024 14:39:52 (eastern)                      |  |  |  |  |  |  |  |  |
|               | City, State, Zip Code  | <del></del>                                      |  |  |  |  |  |  |  |  |
|               | ☐ Check here if address has changed  | (3) ID Number: 202                               |  |  |  |  |  |  |  |  |
| (4)           | Check appropriate box(es):   |  |  |  |  |  |  |  |  |  |
| ( ' /         | Check appropriate box(es).  Candidate Office Sought: County Commission, District 5  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   | dentifiers                                       |  |  |  |  |  |  |  |  |
| Cove          | ver Period: From 10 / 1 / 2023 To  | 12 / 31 / 2023 Report Type: Q4                   |  |  |  |  |  |  |  |  |
| X O           |  | ecial Election Report                            |  |  |  |  |  |  |  |  |
| (6)           | Contributions This Report  | (7) Expenditures This Report                     |  |  |  |  |  |  |  |  |
| ,             | sh & Checks \$,,,000   | Monetary Expenditures \$,, _10 . 33              |  |  |  |  |  |  |  |  |
| Loar          |  | Transfers to Office Account \$ , , , 0 . 00      |  |  |  |  |  |  |  |  |
| Tota<br>In-Ki | al Monetary \$,1 , 500 . 00  | Total Monetary \$ , , _10 . 33                   |  |  |  |  |  |  |  |  |
|               | ,, ,,  | (8) Other Distributions \$ , , <u>0</u> 00       |  |  |  |  |  |  |  |  |
| (9)           | (9) TOTAL Monetary Contributions To Date \$,1, _50000  |  |  |  |  |  |  |  |  |  |
| (T            | (11) Cert  It is a first degree misdemeanor for any person certify that I have examined this report and it is true, corre  Type name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)   | on to falsify a public record (ss. 839.13, F.S.) |  |  |  |  |  |  |  |  |
|               | ignature   | Signature  |  |  |  |  |  |  |  |  |

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (3) Cover Period   | (1) Name       | Michael A Sumner                       |      |            | (2) I.D. Number 202                                       |                      |           |  |  |
|--|----------------|--|------|------------|---|----------------------|-----------|--|--|
| (3) Cover Period   |                |  |      |            |   |                      |           |  |  |
| (5)  | (3) Cover Peri |  | thro |            |   | (4) Page             | a 1       | of <sup>1</sup>                        |  |
| Date   Full Name (Last, Suffix, First, Middle)   Sequence   Number   Street Address & City, State, Zip Code   Summer, Michael A.   12/19/2023   Froiseted Voter***   Type   Occupation   Type   Description   Stresidential LO   Type   Description   Ty | Z              | ************************************** |      |            |   |                      | N-        |  |  |
| Date   Full Name (Last, Suffix, First, Middle)   Sequence   Number   Street Address & City, State, Zip Code   Summer, Michael A.   12/19/2023   Froiseted Voter***   Type   Occupation   Type   Description   Stresidential LO   Type   Description   Ty | (5)            | (7)                                    |      | (8)        | (9)   | (10)                 | (11)      | (12)                                   |  |
| Sequence Number City, State, Zip Code City, State, Zip Code Type Occupation Type Description Amendment Amount Summer, Michael A. ***Protected Voter***  1  1  1  1  1  1  1  1  1  1  1  1   |                |  |      |            |   |                      |           | ************************************** |  |
| Sequence Number City, State, Zip Code City, State, Zip Code Type Occupation Type Description Amendment Amount Summer, Michael A. ***Protected Voter***  1  1  1  1  1  1  1  1  1  1  1  1   | (6)            | (Last, Suffix, First, Middle)          |      |            |   |                      |           |  |  |
| Number   City, State, Zip Code   Type   Ocupation   Type   Description   Amendment   Amount  |                |  | Co   | ontributor | Contribution  | In-kind              |           |  |  |
| 12/19/2023   |                | City, State, Zip Code                  |      |            | ACCURACY AND LINE AND | 110000 7117111111770 | Amendment | Amount                                 |  |
|  | 10/10/000      | Sumner, Michael A.                     |      |            |   | *                    |           | \$1,500.0                              |  |
|  | 12/19/2023     | ***Protected Voter***                  |      | 1          |   |                      |           |  |  |
|  |                |  |      | appraiser  |   |                      |           |  |  |
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

| (1) Name _1 | Michael | A Sun | ner |         |         |      | <br>(2) I.D. Nun | nber | 2  | 202 |  |
|-------------|---------|-------|-----|---------|---------|------|------------------|------|----|-----|--|
|             | 1       | 0/1/2 | 023 |         | 12/31/2 | 2023 |                  |      |    |     |  |
| (3) Cover P | eriod   | I     | 1   | through | 1       | 1    | (4) Page         | 1    | of | 1   |  |

| (5)                               | (7)   | (8)   | (9)                 | (10)      | (11)    |
|-----------------------------------|---|---|---------------------|-----------|---------|
| Date<br>(6)<br>Sequence<br>Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount  |
| 12/28/2023                        | Seacoast Bank,<br>1409 S. Parrott Avenue<br>Okeechobee, FL 34974                        | campaign checks   | MO                  |           | \$10.33 |
| 1                                 |   |   |                     |           |         |
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| DS-DE 14 (Rev.                    | 44(40.1)  |   |                     |           |         |