CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Cheryl Godwin Canova	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1218038]						
(2) 5346 NW County Road 229	Submitted on:						
Address (number and street) Starke, Fl 32091	7/18/2020 17:54:55 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number:240						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>School Board Member District 3</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) 							
(5) Report Identifiers							
Cover Period: From <u>6</u> / <u>13</u> / <u>2020</u> To	9 / <u>10</u> / <u>2020</u> Report Type: <u>R</u>						
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 000	Monetary Expenditures \$, , , 0 . 00						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Total Monetary \$	Total Monetary \$, , , 0 . 00						
	(8) Other Distributions						
	\$,,000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>500</u> . <u>00</u>	\$,, <u>500</u> . <u>00</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 ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
x	x						
Signature	Signature						

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name Godwin Canova				(2) I.D. Number				
6/13/2020			9	9/10/2020					
(3) Cover Peri	od / /	thro	bugh	<i>ll</i>	(4) Page	e <u>1</u>	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		
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1 1									
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Cher	CAMPAIGN TREASURER' yl Godwin Canova		D EXPENDIT (2) I.D. Number		240
(3) Cover Period	6/13/2020 I/through_	9/10/2020 //	(4) Page <u>1</u>	of	1
(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) Amendment	(11) Amount
	Canova, Cheryl Godwin 5346 NW County Road 229 Starke, Fl 32091	return of unused campaign contribution.	DI		\$495.70
_/ /					
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_ / /					
//					
11					
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DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES