

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) (CREW) Cocoa Beach Citizens for Comm. Rec. Education and  
 Name  
 (2) 13 Fairway Drive  
 Address (number and street)  
Cocoa Beach, FL 32931  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1235410]  
 Submitted on:  
 10/21/2020 08:53:43 (eastern)

Check here if address has changed

(3) ID Number: 781

(4) Check appropriate box(es):

- |   |  |
|---|--|
| <p><input type="checkbox"/> Candidate Office Sought: _____</p> <p><input type="checkbox"/> Political Committee (PC)</p> <p><input checked="" type="checkbox"/> Electioneering Communications Org. (ECO)</p> <p><input type="checkbox"/> Party Executive Committee (PTY)</p> <p><input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications)</p> | <p><input checked="" type="checkbox"/> Check here if PC or ECO has disbanded</p> <p><input type="checkbox"/> Check here if PTY has disbanded</p> <p><input type="checkbox"/> Check here if no other IE or EC reports will be filed</p> |
|---|--|

### (5) Report Identifiers

Cover Period: From 10 / 3 / 2020 To 10 / 16 / 2020 Report Type: G5

Original       Amendment       Special Election Report

#### (6) Contributions This Report

Cash & Checks      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

Loans                      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

In-Kind                      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

#### (7) Expenditures This Report

Monetary Expenditures      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

Transfers to Office Account      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

Total Monetary      \$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

#### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

#### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 500 . 00

#### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , \_\_\_\_\_ , 500 . 00

### (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) \_\_\_\_\_  
 Individual (only for IE or electioneering comm.)     Treasurer     Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate                       Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (CREW) Cocoa Beach Citizens for Comm. Rec. Education and Water 781 (2) I.D. Number \_\_\_\_\_

10/3/2020 through 10/16/2020

(3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type      Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name (CREW) Cocoa Beach Citizens for Comm. Rec. Education and Water (2) I.D. Number 781

10/3/2020 through 10/16/2020

(3) Cover Period      /      /      through      /      /      (4) Page 1 of 0

(5) Date	(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
(6) Sequence Number					
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