	CAMPAIGN TREASURE	ER'S REPORT SUMMARY					
(1) (2)	(CREW) Cocoa Beach Citizens for Comm.  Name 13 Fairway Drive	Rec. Education and FRICE USE ONLY ONLINE SUBMISSION [1223226]					
(2)	Address (number and street)	Submitted on:					
Cocoa Beach, FL 32931		8/6/2020 11:11:58 (eastern)					
,	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:781					
(4)	Check appropriate box(es):						
	□ Candidate Office Sought:   □ 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	t Identifiers					
Cove	er Period: From <u>8</u> / <u>1</u> / <u>2020</u> To	8 / <u>13</u> / <u>2020</u> Report Type: <u>P7</u>					
<u>X</u> 0							
(6)	Contributions This Report	(7) Expenditures This Report					
Cash	n & Checks \$ , , , 000	Monetary					
Loar	<del></del> _ <del></del> _ <del></del>	Transfers to Office Account \$ , , , 0 . 00					
	Monetary \$,,,0 and \$ , , 0 . 00	Total Monetary \$ , , 0 . 00					
In-Ki	πα Ψ,, <u>σ</u>	(8) Other Distributions					
	s Sex intermentation and the victor and the contract of the co	(8) Other Distributions \$ , , 000					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, <u>500</u> 00	\$, <u>500</u> . <u>00</u>					
<u>(T)</u>		tification son to falsify a public record (ss. 839.13, F.S.) rect, and complete:  (Type name)  Candidate Chairperson (only for PC and PTY)					
Х		X					
	gnature	Signature					

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	CREW) Cocoa Beach Citizens for Comm. Rec. (2) LaC i NH mber Water 781						
	8/1/2020		8	/13/2020			
(3) Cover Perio	od///	thro	ough	<i>l l</i>	(4) Pag	e	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	ACTUAL DESCRIPTION OF STATE OF	Туре	Description	Amendment	Amount
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Cover Period _	8/1/2020 8/ /through	/13/2020 //(4	l) Page <u>1</u>	of	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)
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DS-DE	14 / F	P VAS	1/13