CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Families for Better Schools	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1281713]						
(2) 419 N Washington Av	Submitted on:						
Address (number and street) Titusville, FL 32796	9/21/2022 13:49:49 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 920						
(4) Check appropriate box(es):							
Candidate Office Sought:							
Political Committee (PC) Electioneoring Communications Org. (ECO)	Check have if DC as ECO has dishanded						
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	 Check here if PC or ECO has disbanded Check here if PTY has disbanded 						
☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed						
individual making electioneering communications)							
(5) Report Identifiers							
Cover Period: From 9 / <u>17</u> / <u>2022</u> To	9 / <u>23</u> / <u>2022</u> Report Type: <u>G3</u>						
🖾 Original 🗌 Amendment 🗌 Sp	pecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$, , , 0 . 00	Expenditures \$, , , 00						
Loans \$,,0.00	Transfers to						
	Office Account \$ _ , _ , _ 0 . 00						
Total Monetary \$, 0 . 00							
	Total Monetary \$, , , 0 . 00						
In-Kind \$,,0 00							
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>2</u> , <u>070</u> . <u>00</u>	\$,, <u>843</u> .00						
(44) 0-							
	rtification son 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	<u>X</u>						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Families for Bette	nilies for Better Schools			(2) I.D. Number		
	9/17/2022			/23/2022			
(3) Cover Peric	od / /	thro	bugh	I I	(4) Pag	e _1	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name <u>Families for Better Schools</u> (2) I.D. Number <u>920</u>							
	9/17/2022 /through	9/23/2022	4) Page <u>1</u>	of	0		
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount		
_/ /							
_/ /							
_/ /							
11							
//							
_/ /							
_/ /							
_/ /							

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