CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Families for Better Schools	OFFICE USE ONLY						
Name	ONLINE SUBMISSION						
(2) 419 N Washington Av	Submitted on:						
Address (number and street)	8/2/2022 14:29:54 (eastern)						
Titusville, FL 32796 City, State, Zip Code							
	(2) ID Number						
Check here if address has changed	(3) ID Number: 920						
(4) Check appropriate box(es):							
Candidate Office Sought: Political Committee (PC)							
\mathbf{x} Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
Party Executive Committee (PTY)	─ Check here if PTY has disbanded						
Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if no other IE or EC reports will be filed						
(5) Report Identifiers							
Cover Period: From 7 / 23 / 2022 T	o 7 / 29 / 2022 Report Type: P5						
☑ Original □ Amendment □ S	Special Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$, , 0 . 00	Expenditures \$, , 00						
¢ 0.00							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$						
Total Monetary \$, , 0.00	Office Account \$,, 0 . 00						
	Total Monetary \$, 0.00						
In-Kind \$,,0.00	, <u> </u>						
······································	(8) Other Distributions						
	\$, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>1</u> , <u>070</u> . <u>00</u>	\$,, <u>0</u> . <u>00</u>						
(11) C	ertification						
	erson to falsify a public record (ss. 839.13, F.S.)						
I certify that I have examined this report and it is true, ca	orrect, and complete:						
(Type name) (Type name)							
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)						
or electioneering comm.)							
X	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Families for Better Schools				(2) I.D. Number		
	7/23/2022		7	/29/2022			
(3) Cover Peri	od / /	thro	bugh	I I	(4) Pag	e _1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	Co	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	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

(1) Name Fami	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES) Name Families for Better Schools (2) I.D. Number 920						
(3) Cover Period	7/23/2022 /through	7/29/2022	4) Page <u>1</u>	of_	0		
(5) Date (6) Sequence	(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		
Number	Gity, State, Zip Code			Amendment	Amount		
_/ /							
_/ /							
_/ /							
_/ /							
_/ /							
_/ /							
11							

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