CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Dwight Seigler							
Name (2) 2644 Pineapple Avenue	ONLINE SUBMISSION [1209403]						
(2) <u>2644 Pineapple Avenue</u> Address (number and street)	Submitted on:						
Mims, FL 32754	6/9/2020 17:35:01 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 785						
(4) Check appropriate box(es):							
Candidate Office Sought: County Commi	ssioner, District 1						
 Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed 							
(5) Report Identifiers							
Cover Period: From <u>4</u> / <u>1</u> / <u>2020</u> To	o <u>4</u> / <u>30</u> / <u>2020</u> Report Type: <u>M4</u>						
□ Original	pecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 000	Monetary Expenditures \$,,,000						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,000						
Total Monetary \$	Total Monetary \$, , , 0 . 00						
······································	(8) Other Distributions						
	\$,,000						
(9) TOTAL Monetary Contributions To Date \$,,,0.	(10) TOTAL Monetary Expenditures To Date \$,,,0.						
(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, co	rrect, 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						

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name				(2) I.D. Number					
4/1/2020			4	4/30/2020					
(3) Cover Perio	od / /	thro	ough	11	(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		
1 1									
1 1									
/ /									
1 1									
1 1	-								
/ /	-								
/ /	-								
/ /	_								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name_Dwight_Seigler (2) I.D. Number 785							
(3) Cover Period	4/1/2020 / /through	4/30/2020 //(4) 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) Amendment	(11) Amount		
_/ /							
_/ /							
_/ /							
_/ /							
_/ /							
_/ /							
_/ /							

DS-DE 14 (Rev. 11/13)

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