	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	JoAnne S. Diana	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	739 Hyacinth Circle	Submitted on:							
	Address (number and street)	8/8/2020 15:13:28 (eastern)							
	Barefoot Bay, FL 32976  City State Zip Code								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 843							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: Barefoot Bay	Trustee							
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	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							
	individual making electioneering communications)								
	(5) Report	Identifiers							
Cove	er Period: From 7 / 25 / 2020 To								
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(~)	Continuations that report	Monetary							
Casl	h & Checks \$ , , 20 . 00	Expenditures \$ , , 0 . 00							
		· — · — · — —							
Loar	ns \$,,, <u>0</u> . <u>00</u>	Transfers to							
		Office Account \$ , , 0 . 00							
Tota	al Monetary \$ , , _20 . 00								
		Total Monetary \$ , , 0 . 00							
In-Ki	ind \$,,, <u>0</u> . <u>00</u>								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
(-,	\$,, 184 . 89	\$ , , 25 . 00							
	· · ·	· / /							
	(11) Cert								
	It is a first degree misdemeanor for any person								
Ιc	I certify that I have examined this report and it is true, correct, and complete:								
(T	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		X							
	ignature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	JoAnne S. Diana	(2) I.D. Number								
	7/25/2020			/31/2020						
(3) Cover Perio	od//	thro			(4) Page	1	of <sup>1</sup>			
VI.20 80										
(5)	(7)		(8)	(9)	(10)	(11)	(12)			
Date	Full Name									
(6)	(Last, Suffix, First, Middle)									
Sequence	Street Address &		ontributor	Contribution	In-kind					
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount			
7/27/2020	SVENDSON, BrIIAN		000000001	CA			\$20.0			
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DS-DE 13 (Rev. 11/13 ) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name	JoAnne	S.	Dian	a			4940099739 998 718 10	 (2) I.D. Nun	nber	8	343	an an
		7/2	5/202	20		7/31/	2020		-			
(3) Cover P	eriod		/	_/_	through_		I	 (4) Page	1	of	0	

(5) Date	(7) Full Name	(8)	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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