	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Bill Prummell	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	PO Box 510086	Submitted on:					
	Address (number and street)	8/6/2020 16:15:14 (eastern)					
	Punta Gorda, FL 33951-0086 City, State, Zip Code						
	_	(2) ID Number					
	Check here if address has changed	(3) ID Number:589					
(4)	Check appropriate box(es):						
	Candidate Office Sought: Sheriff						
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded					
	☐ Party Executive Committee (PTY)	☐ 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	7 / 31 / 2020 Report Type: P6					
X O	riginal Amendment Spo	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
		Monetary					
Casl	h & Checks \$, , <u>100</u> . <u>00</u>	Expenditures \$, , 3 . 20					
T	s \$, , 0.00	To a facility					
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$					
Toto	I Monetary \$, , 100 . 00	Office Account \$, , , 0 . 00					
TOLA	, , , , , , , , , , , , , , , , , , ,	Total Monetary \$, , 3 . 20					
In-Ki	ind \$, , 29.00	, , ,					
III-IXI	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions					
		\$,,					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$	\$					
	(11) Cer	I tification					
		on to falsify a public record (ss. 839.13, F.S.)					
Ιc	certify that I have examined this report and it is true, corr	rect, and complete:					
/T	ype name)	(Type name)					
	Individual (only for IE	Candidate Chairperson (only for PC and PTY)					
	electioneering comm.)						
Х		X					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) NameBil	l Prummel	1				(2) I.D. Number		589	
(3) Cover Period	7/25/20:	20 /	through	7/31/ /	′2020 //	(4) Page	1	_ of _	1

1000 98	1		1400			T T	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
7/30/2020	Sturges, Jane 2427 St. Davids Island Ct Punta Gorda, FL 33950	I	retired	СН			\$100.00
1							
7/30/2020	Andres, Rodriguez FS119.071 FS119.071 FS119.071, FL FS119.071	I	leo	IK	website		\$29.00
2							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
		1			1		

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _B	Bill	Prumme	11						 (2) I.D. Nur	nber	Ę	589	
		7/25	/20	20		7/31/	/202	0					
(3) Cover Pe	eriod	1		1	through	1		1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
7/30/2020	Pay Pal, pay pal pay pal	processing fee	MO		\$3.20
1	pay pal pay pal, fl pay pal				
_//					
//					
//					
//					
//					
//					
DS-DE 14 (Rev.	11/12 \				