|                                                                                                                  | CAMPAIGN TREASURER'S REPORT SUMMARY                                   |                                                       |  |  |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-------------------------------------------------------|--|--|--|--|--|--|--|--|
| (1)                                                                                                              | Mike Cella                                                            | OFFICE USE ONLY                                       |  |  |  |  |  |  |  |  |
|                                                                                                                  | Name                                                                  | ONLINE SUBMISSION                                     |  |  |  |  |  |  |  |  |
| (2)                                                                                                              | 1630 Calming Water Drive                                              | Submitted on:                                         |  |  |  |  |  |  |  |  |
|                                                                                                                  | Address (number and street)                                           | 6/2/2020 12:48:35 (eastern)                           |  |  |  |  |  |  |  |  |
|                                                                                                                  | Fleming Island, FL 32003                                              |                                                       |  |  |  |  |  |  |  |  |
|                                                                                                                  | City, State, Zip Code                                                 |                                                       |  |  |  |  |  |  |  |  |
|                                                                                                                  | Check here if address has changed                                     | (3) ID Number: 674                                    |  |  |  |  |  |  |  |  |
| (4)                                                                                                              | Check appropriate box(es):                                            |                                                       |  |  |  |  |  |  |  |  |
|                                                                                                                  | ☐ Candidate Office Sought: County Commi                               | ssioner District 1                                    |  |  |  |  |  |  |  |  |
|                                                                                                                  | ☐ 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                       |  |  |  |  |  |  |  |  |
|                                                                                                                  | ☐ 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                                                                                           |                                                                       |                                                       |  |  |  |  |  |  |  |  |
| Cove                                                                                                             | er Period: From $\frac{5}{2}$ / $\frac{1}{2}$ / $\frac{2020}{20}$ To  | 5 / 31 / 2020 Report Type: <u>M5</u>                  |  |  |  |  |  |  |  |  |
| X O                                                                                                              | riginal Amendment Sp                                                  | pecial Election Report                                |  |  |  |  |  |  |  |  |
| (6)                                                                                                              | Contributions This Report                                             | (7) Expenditures This Report                          |  |  |  |  |  |  |  |  |
| Casł                                                                                                             | n & Checks \$ , , , 000                                               | Monetary                                              |  |  |  |  |  |  |  |  |
| Loar                                                                                                             | s , , <u>0</u> . <u>00</u>                                            | Transfers to Office Account \$ , , 0 . 00             |  |  |  |  |  |  |  |  |
| Total Monetary \$ , , 0 . 00                                                                                     |                                                                       | Total Monetary \$ , , , 00                            |  |  |  |  |  |  |  |  |
| In-Ki                                                                                                            | ind \$ , , 0 . <u>00</u>                                              |                                                       |  |  |  |  |  |  |  |  |
|                                                                                                                  |                                                                       | (8) Other Distributions                               |  |  |  |  |  |  |  |  |
|                                                                                                                  |                                                                       | \$,,000                                               |  |  |  |  |  |  |  |  |
| (9)                                                                                                              | TOTAL Monetary Contributions To Date                                  | (10) TOTAL Monetary Expenditures To Date              |  |  |  |  |  |  |  |  |
|                                                                                                                  | \$, _26, _15000                                                       | \$, <u>1</u> , 021. 87                                |  |  |  |  |  |  |  |  |
|                                                                                                                  |                                                                       |                                                       |  |  |  |  |  |  |  |  |
| (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, correct, and complete:                                |                                                                       |                                                       |  |  |  |  |  |  |  |  |
| (T                                                                                                               | ype name)                                                             | (Type name)                                           |  |  |  |  |  |  |  |  |
|                                                                                                                  | Individual (only for IE                                               | ☐ Candidate ☐ Chairperson (only for PC and PTY)       |  |  |  |  |  |  |  |  |
| X                                                                                                                |                                                                       | x                                                     |  |  |  |  |  |  |  |  |
|                                                                                                                  | gnature                                                               | Signature                                             |  |  |  |  |  |  |  |  |

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name              | Mike Cella                                                   |      |            |                     | 2) I.D. Numbe | er <u>6</u> | 74     |
|-----------------------|--------------------------------------------------------------|------|------------|---------------------|---------------|-------------|--------|
|                       | 5/1/2020<br>od///                                            |      | 5          | /31/2020            | (4) Pag       | e <u>1</u>  | of     |
| (5) Date (6) Sequence | (7) Full Name (Last, Suffix, First, Middle) Street Address & |      | (8)        | (9)<br>Contribution | (10)          | (11)        | (12)   |
| Number                | City, State, Zip Code                                        | Туре | Occupation | Туре                | Description   | Amendment   | Amount |
| 1 1                   |                                                              |      |            |                     |               |             |        |
| 1 1                   |                                                              |      |            |                     |               |             |        |
| j j                   |                                                              |      |            |                     |               |             |        |
| J I                   |                                                              |      |            |                     |               |             |        |
| 1 1                   |                                                              |      |            |                     |               |             |        |
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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     | ike  | Cella |     | 100 1100 | Was a series of the series of | 10.4077000-01000 | 9910 VA 11 | <br>(2) I.D. Nun | nber | (  | 574 |  |
|--------------|------|-------|-----|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------|------------------|------|----|-----|--|
|              |      | 5/1/  | 202 | 0        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 5/31/2           | 020        |                  | 32-  |    |     |  |
| (3) Cover Pe | riod | 1     |     | 1        | through                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 1                | 1          | (4) Page         | 1    | of | 1   |  |

| (5)                      | (7)                                                                                     | (8)                                                                 | (9)                 | (10)      | (11)    |
|--------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------------|-----------|---------|
| Date (6) Sequence Number | Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | Purpose<br>(add office sought if<br>contribution to a<br>candidate) | Expenditure<br>Type | Amendment | Amount  |
| 5/15/2020                | UPS Store,<br>5000-18 HWY 17 S<br>Fleming Island, FL 32003                              | notarize<br>election forms                                          | MO                  |           | \$20.00 |
| 1                        | Fleming Island, FL 32003                                                                |                                                                     |                     |           |         |
| //                       |                                                                                         |                                                                     |                     |           |         |
|                          |                                                                                         |                                                                     |                     |           |         |
|                          |                                                                                         |                                                                     |                     |           |         |
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|                          |                                                                                         |                                                                     |                     |           |         |
| DS-DE 14 (Rev.           | 14/42 \                                                                                 |                                                                     |                     |           |         |