CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Gerald Beasley	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1288292]								
(2)	3304 Tiki Ln	Submitted on:								
	Address (number and street)	11/20/2022 15:20:40 (eastern)								
	Green Cove Springs, FL 32043									
	City, State, Zip Code	(0) ID No. 1								
	Check here if address has changed	(3) ID Number:								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: School Board District 5</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From 8 / <u>23</u> / <u>2022</u> To	11 / 21 / 2022 Report Type: TR								
X o	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$ , , ,000	Monetary								
Loar	<del></del>	Transfers to Office Account \$ , , , 0 . 00								
	I Monetary \$,,,	Total Monetary \$ ,1 , <u>513</u> . <u>13</u>								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$ , , <u>0</u> 00_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$ , <u>3</u> , <u>155</u> . <u>00</u>	\$ , <u>3</u> , <u>149</u> . <u>05</u>								
<u>(T)</u>	(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:  (Type name)  Individual (only for IE    Deputy Treasurer									
X		X								
	gnature	Signature								

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

(1) Name	Gerald Beasley				2) I.D. Numbe	er	82
	8/23/2022			1/21/2022			
(3) Cover Perio	od///	thro			(4) Pag	e	of
VIO.1 998		,			90. 100		
(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
1 1							
<i>I</i> 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
	I .						I .

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name _	Gerald	Beasle	ΣY				 (2) I.D. Nun	nber	7	782	
		8/23/2	022		11/21/	2022	·- ·	-			
(3) Cover P	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
11/20/2022	Beasley, Gerald David 3304 Tiki Lane Green Cove Springs, FL 32043	personal reimbursement	RM		\$1,513.13
1					
//					
//					
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