CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Beth Clark	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	2207 Holly Leaf Lane	Submitted on:					
	Address (number and street)	6/14/2024 12:09:59 (eastern)					
	Orange Park, FL 32073 City, State, Zip Code						
		(2) ID Number 056					
/ 4\	Check here if address has changed	(3) ID Number:856					
(4)	Check appropriate box(es):	District 2					
		District 3					
		☐ Check here if PC or ECO has disbanded					
	☐ Party Executive Committee (PTY)	☐ Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	☐ Check here if no other IE or EC reports will be filed					
	Manual making electioneering communications,						
	(5) Report	Identifiers					
Cove	rer Period: From 6 / 1 / 2024 To	6 / 14 / 2024 Report Type: P1					
X O	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
	!	Monetary					
Cash	h & Checks \$, 3 , <u>000</u> . <u>00</u>	Expenditures \$, , 0 . 00					
-	Φ 0.00						
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$					
- .	··· · • • 2 000 00	Office Account \$, , , 0 . 00					
lota	al Monetary \$,3 , <u>000</u> . <u>00</u>	Total Monetary \$. 0 . 00					
· 12	· · • • 0 00	Total Monetary \$, , , 0 . 00					
In-Ki	ind \$,, <u>0</u> . <u>00</u>						
	1	(8) Other Distributions					
		\$, , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$	\$, <u>3</u> , <u>086</u> . <u>33</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:							
_(T	ype name)	(Type name)					
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		X					
	ignature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(2) I.D. Number 856								
	6/1/202	4		6/14/	2024				
(3) Cover Period	T	1	through	1	1	(4) Page	1	of $\frac{1}{}$	

(5)	(7)	7	(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
6/6/2024	Activity Committee Florida, Realtors Political 7025 Augusta National Drive Orlando, FL 32822-5017		real estate	СН			\$1,000.0
6/6/2024	Action Committee Florida, Realtors Political 7025 Augusta National Drive Orlando, FL 32822-5017		real estate	СН			\$1,000.0
6/6/2024	Advocacy Commitee, Realtors Political 7025 Augusta National Drive Orlando, FL 32822-5017		real estate	СН			\$1,000.0
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J I							
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Name Beth	6/1/2024 6/	/14/2024	2) I.D. Number	-	
Cover Period	/through		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)	(11)
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OS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							