CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) DAVIE PARRISH	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1241841]						
(2) <u>127 SE QUIET GLEN</u>	Submitted on:						
Address (number and street) LAKE CITY, FL 32025	1/20/2021 12:36:39 (eastern)						
City, State, Zip Code	—						
Check here if address has changed	(3) ID Number: 1224						
(4) Check appropriate box(es):							
Candidate Office Sought: TAX COLLECTOR	٤						
Political Committee (PC)							
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	 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							
Cover Period: From <u>10</u> / <u>30</u> / <u>2020</u> To	2 / 1 / 2021 Report Type:						
⊠ Original □ Amendment □ Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , 0 . 00	Monetary Expenditures \$,, <u>130</u> .76						
	· · · · · · · · · · · · · · · · · · ·						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Total Monetary \$, , 0.00	Office Account \$,,, 0 . 00						
	Total Monetary \$, ,130.76						
In-Kind \$,,0.00							
	(8) Other Distributions						
	\$,,000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>2</u> , <u>894</u> . <u>45</u>	\$, <u>2</u> , <u>894</u> . <u>45</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)	(Type name)						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(2) I.D. Number 1224							
	10/30/2020			2/1/2021				
(3) Cover Peri	od / /	thro	ough	<i>II</i>	(4) Page	e	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
1 1								
<i>I I</i>	_							
1 1	_							
1 1	_							
1 1	_							
1 1								
1 1		5.						
1 1	_							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name DAVI	CAMPAIGN TREASURER'	(1	2) I.D. Number		1224
(3) Cover Period	10/30/2020 d/ through_	2/1/2021 /(4) Page <u>1</u>	of_	1
(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) Amendment	(11) Amount
11/12/2020	USPS, 250 NW Main Blvd, Lake City, FL 32055	postage mailing thank you cards	MO		\$48.60
1/5/2021 // 2	Parrish, William Davie 127 SE Quiet Gln Lake City, FL 32025	repay campaign loans	MO		\$82.16
_ / /					
_ / /					
_/ /					
_ / _/					
_/ /					

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