CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) TODD FRANKLIN, II	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1232655]						
(2) <u>335 SW SUSAN CIR, LOT 22</u>	Submitted on:						
Address (number and street) LAKE CITY, FL 32025	9/30/2020 21:43:57 (eastern)						
City, State, Zip Code	—						
Check here if address has changed	(3) ID Number: 1245						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>COUNTY COMMISSION DIST 5</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PTY has disbanded Check here if no other IE or EC reports will be filed 							
(5) Repor	t Identifiers						
Cover Period: From <u>6</u> / <u>29</u> / <u>2020</u> To	9 / <u>27</u> / <u>2020</u> Report Type: <u>TRW</u>						
☐ Original	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 000	Monetary Expenditures \$, , , 0 . 00						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,0						
Total Monetary \$	Total Monetary \$, , , 0 . 00						
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u></u> , <u></u> 00	\$,, <u>75</u> . <u>00</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	TODD FRANKLIN, II	(2) I.D. Number					245
	6/29/2020			/27/2020		7	0
(3) Cover Perio	od / /	thro	bugh	11	(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	-						
/ /							
1 1							
1 1	-						
I I	-						
1 1	_						
1 1	_						
/ /	_						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name TODD	CAMPAIGN TREASURER'		2 EXPENDIT (2) I.D. Number	1245	
(3) Cover Period	6/29/2020 1/through_	9/27/2020 / /	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
6/29/2020 1	Whitlow, LeAnne 402 SW Stewart Loop Lake City, FL 32024	repay loan	DI		\$50.OC
6/29/2020 // 2	Franklin, Todd C 335 SW Susan Cir Lot 22 Lake City, FL 32025	repay loan	DI		\$25.00
_/ /					
_/ /					
_/ /					
//					
_/ /					
11					

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