	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
(1)	Michael James Brannin	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION [1198724]								
(2)	PO Box 1581	Submitted on:								
	Address (number and street)	2/4/2020 14:27:15 (eastern)								
	Cross City, FL 32628	2,1,2020 21 27 20 (00000211)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:177								
(4)	Check appropriate box(es):									
	Candidate Office Sought: Sheriff									
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	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 $\frac{1}{1}$ / $\frac{1}{2020}$ To									
⊠ o		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
(0)	Contributions This Report									
Casl	n & Checks \$ , , <u>500</u> . <u>00</u>	Monetary								
Loar	ns \$ , , 0.00	Transfers to								
	<del></del>	Office Account \$ , , 0 . 00								
Tota	I Monetary \$ , , 500 . 00									
		Total Monetary \$ , , 262 . 40								
In-Ki	ind \$,,,000									
		(8) Other Distributions								
		\$ , , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$,, 500 . 00	\$, ,, 262 . 40_								
	(11) Cert It is a first degree misdemeanor for any pers	tification								
1		, , , ,								
10	certify that I have examined this report and it is true, corr	ect, 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	Michael James Brann	in		(2) I.D. Number			
	1/1/2020		1	/31/2020			
(3) Cover Perio	od///	thro	ough	11_	(4) Page	e <u>1</u>	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)	_			Incomplete and a second		
Sequence Number	Street Address & City, State, Zip Code		ontributor Occupation	Contribution	In-kind Description	Amendment	Amount
Number	Brannin, Michael		clerk	Type CA	Description	7 anonament	\$500.0
1/24/2020	PO Box 1581 Cross City, FL 32628						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES	

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

(1) Name _	Michael	James	Bran	nin			 (2) I.D. Nun	nber	]	L77	
		1/1/20	20		1/31/2	020	-				
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
1/24/2020	Supervisor of Elections, PO Box 2057 Cross City, FL 32628	petitions	MO		\$10.20
1/31/2020	DIXIE COUNTY HIGH, SCHOOL  CROSS CITY CROSS CITY, FL 32628	high school baseball banner	МО		\$125.00
1/28/2020	LADY BEAR SOFTBALL, CROSS CITY CROSS CITY, FL 32628	lady softball banner	МО		\$125.00
1/31/2020	SUPERVISOR OF ELECTIONS, 229 NE 351 HWY SUIT A CROSS CITY, FL 32628	signature petitions	МО		\$2.20
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