CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Darby Butler	OFFICE USE ONLY ONLINE SUBMISSION								
(2)	Name 1329 NE 351 Hwy	[1214040]								
(2)	Address (number and street)	Submitted on:								
	Cross City, FL 32628	7/1/2020 11:27:14 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:179								
(4)	Check appropriate box(es):									
	☐ Candidate Office Sought: Sheriff									
	□ 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) Report	Identifiers								
Cove	er Period: From 6 / <u>13</u> / <u>2020</u> To	6 / 26 / 2020 Report Type: P2								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$, , <u>500</u> . <u>00</u>	Monetary								
Loar	s , , , , 000	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$, , <u>500</u> . <u>00</u>	Total Monetary \$, , 662 . 52								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$, , <u>0</u> 0								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>8</u> , <u>500</u> . <u>00</u>	\$, <u>5</u> , <u>784</u> . <u>81</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:										
	ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)								
х		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Darby Butler				2) I.D. Numbe	r1	.79
	6/13/2020			/26/2020			
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	1	of
		r					
(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		Occupation	Туре	Description	Amendment	Amount
6/17/2020	Lyons, SD PO BOX 343	I	retired	CH			\$500.0
I I	Horseshoe Beach, FL 32648						
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1 1							
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Darby Butler					 (2) I.D. Number			179		
		6/13/2	020		6/26/2	020					
(3) Cover Pe	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
6/16/2020	Dixie County Advocate, 174 NE 351 Hwy Cross City, FL 32628	advertising	МО		\$181.13
1					
6/18/2020	Print Shop of Chiefland, 224 N Main Street Chiefland, FL 32626	campaign signs/cards	МО		\$481.39
2					
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DS-DE 14 (Rev	44740 1				