	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Paul N Gainey	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION [1259649]						
(2)	P.O. Box 1205	Submitted on:						
	Address (number and street) Cross City, Fl 32628	4/22/2022 11:55:55 (eastern)						
	City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 208						
(4)	Check appropriate box(es):	(5, 12 1131113511						
\ ' <i>'</i>	Member - 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							
	(5) Report	Identifiers						
Cov	er Period: From $3 / 1 / 2022$ To	3 / 31 / 2022 Report Type: M3						
X O	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	h & Checks \$, , <u>100</u> . <u>00</u>	Monetary						
Loar		Transfers to Office Account \$, , , 0 . 00						
	al Monetary \$, , <u>100</u> . <u>00</u>	Total Monetary \$, , 0 . 00						
In-Ki	find \$,,,000							
		(8) Other Distributions \$, , 000						
(9)	TOTAL Monetary Contributions To Date \$, , _10000	(10) TOTAL Monetary Expenditures To Date \$, , 000						
lo	(11) Cert It is a first degree misdemeanor for any person certify that I have examined this report and it is true, corre	on to falsify a public record (ss. 839.13, F.S.)						
	Type name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		×						
Si	ignature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Paul N Gainey (2) I.D. Numbe						er2	808
	3/1/2022	3	3/31/2022				
(3) Cover Peri	od///	thro	ough	11_	(4) Pag	e	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
3/23/2022	Gainey, Paul P. O Box 1205 Cross City, Fl 32628	S	county government	CA			\$100.0
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Name Paul 1	3/1/2022 3/	31/2022	2) I.D. Number	*	208
Cover Period _	/through		l) 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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