	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Gary P. Flower	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	Protected								
	Address (number and street)	Submitted on: 6/30/2020 14:15:14 (eastern)							
	1	(730/2020 14:15:14 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 970							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: County Court	Judge Group 14							
	Political Committee (PC)	Check have if DC as ECO has dishauded							
	☐ 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									
Cove		10 / 31 / 2019 Report Type: M10							
	riginal 🖾 Amendment 🔲 Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Cash	n & Checks \$, , 0 . <u>00</u>	Expenditures \$, , 0 . 00							
	¢ 0.00								
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$							
- .	0 00	Office Account \$, , , 0 . 00							
rota	I Monetary \$, ,000	Total Monetary \$. 0 . 00							
		Total Monetary \$, , 0 . 00							
In-Ki	nd \$, <u>300</u> . <u>00</u>								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,56_, _95000_	\$, <u>1</u> , <u>315</u> . <u>50</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:									
(Tv	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
or	electioneering comm.)								
Х		X							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name			(2) I.D. Number 970						
	10/1/2019		1	0/31/2019		1	1		
(3) Cover Perio	d//	thro	ugh	11_	(4) Page	<u> </u>	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence Number	Street Address & City, State, Zip Code		ntributor Occupation	Contribution	In-kind Description	Amendment	Amount		
	Gray Robinson,		attorneys	Type IK	Beschiption	dd	\$300.0		
10/8/2019	50 N. Laura Street #1100 Jacksonville, FL 32202				beverage for reception				
1									
1 1			,						
1 1									
1 1									
1 1									
1 1									
1 1									
1 1									

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Gary	P. Flower	<u>-</u>				(2) I.D. Num	ber	9'	70
(3) Cover Period	10/1/20	19 /	through	10/31/20)19 _/	(4) Page	1	of	0

(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
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DS-DE 14 (Rev.					