

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Donna Deegan

Name

(2) 1015 Atlantic Blvd. # 229

Address (number and street)

Atlantic Beach, FL 32233

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 1091

(4) Check appropriate box(es):

☒ Candidate Office Sought: Mayor

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ 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

OFFICE USE ONLY  
ONLINE SUBMISSION  
[1255473]

Submitted on:  
2/11/2022 11:55:56 (eastern)

### (5) Report Identifiers

Cover Period: From 1 / 1 / 2022 To 1 / 31 / 2022 Report Type: M1

☐ Original

☒ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 0 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 120 , 098 . 67

### (10) TOTAL Monetary Expenditures To Date

\$        , 31 , 338 . 57

### (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)

☐ Individual (only for IE or electioneering comm.) ☐ Treasurer ☐ Deputy Treasurer

X

Signature

(Type name)

☐ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Donna Deegan (2) I.D. Number 1091  
 1/1/2022 through 1/31/2022  
 (3) Cover Period \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
1/22/2022 / /	Lee , S 4132 Ortega Forest Dr Jacksonville, FL 322105813	I	CH		Delete	\$10.00
1						
1/22/2022 / /	Lee , Sarah 4132 Ortega Forest Dr Jacksonville, FL 322105813	I	CH		Add	\$10.00
2						
1/7/2022 / /	Newman , Arlene &William 8302 Barquero Ct N Jacksonville, FL 322174322	I	CH		Delete	\$25.00
3						
1/7/2022 / /	Newman , Arlene 8302 Barquero Ct N Jacksonville, FL 322174322	I	CH		Add	\$25.00
4						
/ /						
/ /						
/ /						
/ /						

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Donna Deegan

(2) I.D. Number 1091

(3) Cover Period 1/1/2022 through 1/31/2022

(4) Page 1 of 0

(5) Date	(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
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