CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Democratic Executive Committee	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	P.O Box 2940	Submitted on:						
	Address (number and street)	2/9/2022 16:13:38 (eastern)						
	Jacksonville, FL 32203  City, State, Zip Code	— I						
		(2) ID Number: 1036						
(4)	Check here if address has changed	(3) ID Number:1036						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: ☐ Political Committee (PC)							
	☐ Electioneering Communications Org. (ECO)	☐ 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						
Cove	er Period: From $\underline{1}$ / $\underline{1}$ / $\underline{2022}$ To	1 / 31 / 2022 Report Type: SG2						
X O	riginal Amendment Spr	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Casl	n & Checks \$ , , , 000	Monetary						
Loar	s , , , o . <u>00</u>	Transfers to Office Account \$ , , 0 . 00						
Tota	I Monetary \$ , , 000	Total Monetary \$ , 1 , 363 . 97						
In-Ki	ind \$ , , 000	, , , , , , , , , , , , , , , , , , , ,						
		(8) Other Distributions \$ , , 000_						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$, <u>34</u> , <u>158</u> . <u>65</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:								
	(Type name)							
	ype name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		X						
Si	gnature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Democratic Executi	ve Co	(2) I.D. Number				
	1/1/2022		1	/31/2022			
(3) Cover Perio	od//	thro	ough	<i>i i</i>	(4) Page	•	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind	A	<b>8</b>
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
f I							
1 1							
1 1							
j. 1							
1 1							
1 1							
1 1		,					
1 1							

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

(1) Name	Democratic Executive Committee					(2) I.D. Nu	mber	1036			
		1/1/20	22		1/31/2	022		-			
(3) Cover Per	riod	1	1	through	1	1	(4) Page	1	of	1	

(5) Date	(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
1/5/2022	Rewired LLC, 41 Flatbush Avenue Fl 1, PMB 731	texting	MO		\$1,363.97
1	Brooklyn, NY 11217				
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					:
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DS-DE 14 (Rev					