CAMPAIGN TREASUR	RER'S REPORT SUMMARY								
(1) Leonard B. White	OFFICE USE ONLY								
Name	ONLINE SUBMISSION								
(2) PO Box 733	Submitted on:								
Address (number and street) Century, FL 32535	7/31/2020 17:58:50 (eastern)								
City, State, Zip Code									
☐ Check here if address has changed	(3) ID Number: 677								
(4) Check appropriate box(es):									
Check appropriate box(es). Candidate Office Sought: Century Town Council, Seat 3 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									
(5) Repo	ort Identifiers								
Cover Period: From 7 / 18 / 2020	To 7 / 24 / 2020 Report Type: P5								
	Special Election Report								
(6) Contributions This Report	(7) Expenditures This Report								
Cash & Checks \$,, _0 . 00 Expenditures \$,, _0 . 00									
Loans \$,,,0 . 00	Transfers to Office Account \$, , , 0 . 00								
Total Monetary \$									
In-Kind \$, , 0 . 00	(8) Other Distributions \$, , 000								
(9) TOTAL Monetary Contributions To Date \$,,16500 \$ \$,,11265									
	(Type name)								
Signature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Leonard B. White				(2) I.D. Numbe	er <u>6</u>	577
	7/18/2020			/24/2020			
(3) Cover Perio	od//	thro	ough	111	(4) Pag	je ¹	of ¹
	;		9,400			1973	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name				3/4-3/3/3/20	0.000	
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
7/22/2020	n/a, n/a n/a	I	n/a	CA	n/a		\$0.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Leonard	В.	Whi	te					 (2) I.D. Nur	nber	(577	
	7	/18	/202	20		7/2	4/20	20					
(3) Cover P	eriod	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
7/22/2020	n/a, n/a n/a n/a	n/a	МО		\$0.00
1	n/a n/a, n/ n/a				
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