CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Dynette Lewis	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1218692]							
(2) <u>16 Maple St</u>	Submitted on:							
Address (number and street) Century, FL 32535	7/22/2020 07:20:29 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 678							
(4) Check appropriate box(es):								
<ul> <li>Cireck appropriate box(es).</li> <li>Candidate Office Sought: <u>Century Town Council, Seat 1</u></li> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>								
(5) Report Identifiers								
Cover Period: From 7 / <u>11</u> / <u>202</u> 0 To	7 / <u>17</u> / <u>2020</u> Report Type: <u>P4</u>							
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , , 000	Monetary Expenditures \$ , , , 0 . 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to           Office Account         \$							
Total Monetary       \$	Total Monetary \$ , , , 0 . 00							
	(8) Other Distributions							
	\$,, 00							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, <u>415</u> . <u>00</u>	\$,, <u>323</u> . <u>86</u>							
ا (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)	(Type name)							
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
x	x							
Signature	Signature							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name			(2) I.D. Number						
7/11/2020			7/17/2020						
(3) Cover Peri	iod / /	thro	ough	11_	(4) Page	e <u> </u>	of		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
7/17/2020	N/a , N/a N/a N/a, N/ N/a	I		CA			\$0.0		
1									
1 1	_								
1 1	_								
1 1	_								
1 1	_								
1 1									
1 1									
1 1									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Dyne	CAMPAIGN TREASURER'		) EXPENDIT 2) I.D. Number	678	
(3) Cover Period	7/11/2020 I/through_	7/17/2020	4) Page <u>1</u>	of	1
(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) Amendment	(11) Amount
	N/a, N/a N/a N/a, N/ N/a	n/a	МО		\$0.00
_/ /					
_/ /					
_/ /					
_/ /					
11					

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES