	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Thomas Richard LeGault	OFFICE USE ONLY					
` '	Name	ONLINE SUBMISSION					
(2)	16 Wellhaven Ln	Submitted on:					
	Address (number and street)	4/27/2020 16:30:28 (eastern)					
	Palm Coast, FL 32164						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 457					
(4)	Check appropriate box(es):						
	Candidate Office Sought: County Commis	sion District 1					
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded					
	Party Executive Committee (PTY)	Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Report	Identifiers					
Cove	er Period: From 1 / 27 / 2020 To	4 / 26 / 2020 Report Type: TR					
× o	riginal Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
(=)	Communications (included)	Monetary					
Cash	n & Checks \$ , , 0 . 00	Expenditures \$ , , 0 . 00					
Ouo.	, <u> </u>						
Loar	ns \$,,,000	Transfers to					
		Office Account \$ , , 0 . 00					
Tota	I Monetary \$,,						
		Total Monetary \$ , , 0 . 00					
In-Ki	nd \$,, <u>0</u> .00						
		(8) Other Distributions					
		\$ , , <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$, 4, 799.82	\$, <u>4</u> , <u>799</u> . <u>82</u>					
	(11) Cert It is a first degree misdemeanor for any pers	ification					
		• • • • • • • • • • • • • • • • • • • •					
Ιc	ertify that I have examined this report and it is true, corr	ect, and complete:					
_(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
Х		×					
	gnature	Signature					

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

	Thomas Richard LeGa  1/27/2020  eriod / / /  (7)  Full Name  (Last, Suffix, First, Middle)		4/26/2020	(4) Page	e <u>1</u>	of _1
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle)	T	1	(4) Page	1	of
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle)	(8)	(0)			
Sequence Number			(9)	(10)	(11)	(12)
	Street Address &	Contribut	or Contribution	In-kind		
31/2020 / /	City, State, Zip Code	Type Occu	oation Type	Description	Amendment	Amoun
	LeGault, Thomas 101 B Street Haines City, Fl 33844	I self emplo	yed CA	no contributi ons during this time frame		\$
<i>f</i> 1						
/ /						
1 1						
<i>f</i> 1						
<i>l</i> 1						
/ 1						
/ /						

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name	Thomas	Richar	d LeG	ault	100 P 7 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	777 798 715	 (2) I.D. Nun	nber	4	<del>1</del> 57	
		1/27/2	020		4/26/20	020					
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5) Date  (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code  LeGault, Thomas 101 B Street	Purpose (add office sought if contribution to a candidate)	Expenditure Type		
1/31/2020	LeGault, Thomas 101 B Street			Amendment	Amount
	H-i Git El 22044	account closing	MO		\$0.00
1	Haines City, Fl 33844		o o		
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//					
//					
//					
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DS-DE 14 (Rev. 1					