CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Donald O'Brien	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	42 Bickford Dr.	[1216745]								
	Address (number and street)	Submitted on:								
	Palm Coast, Fl 32137	7/15/2020 19:11:37 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 458								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: County Commission District 5</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From 6 / 27 / 2020 To	7 / 10 / 2020 Report Type:P3								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casł	n & Checks \$ , , 0 . 00	Monetary Expenditures \$ ,4 , 190 . 18								
Loar	<del></del>	Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$,,,00	Total Monetary \$ ,4 , <u>190</u> . <u>18</u>								
In-Ki	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$ , , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>24</u> , <u>941</u> . <u>40</u>								
<u>(T</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)    Individual (only for IE   Treasurer   Deputy Treasurer   Candidate   Chairperson (only for PC and PTY)									
<u>X</u>		<u>X</u>								
Si	gnature	Signature								

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Donald O'Brien	(2) I.D. Number							
	6/27/2020 od///		7	/10/2020	(4) Pag	je <u>1</u>	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence Number	Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Donald	0'	Brien				 (2) I.D. Nun	nber	4	458	
		6/27/2	020		7/10/20	020		-			
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
7/10/2020	TWG Technologies, PO Box 551204 Jacksonville, FL 32255-1204	consulting	МО		\$1,000.00
1					
7/10/2020	The Whitson Group, PO Box 551204 Jacksonville, FL 32255-1204	consulting & advertising	МО		\$3,190.18
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