	CAMPAIGN TREASURER'S REPORT SUMMARY						
(1)	Fonda Demetrius Davis, Sr	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	P.O. Box 945	Submitted on:					
	Address (number and street)	6/11/2020 12:42:55 (eastern)					
	Apalachicola, FL 32320 City State Zin Code						
	City, State, Zip Code	(2) 12 11					
	Check here if address has changed	(3) ID Number:					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: School Board	Member Dist 3					
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded					
		☐ 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	dentifiers					
Cove							
	er Period: From $\frac{4}{2}$ / $\frac{1}{2020}$ To						
Цο	Original ☐ Amendment ☐ Spe	ecial Election Report T					
(6)	Contributions This Report	(7) Expenditures This Report					
	-	Monetary					
Casl	h & Checks \$, , 0 . <u>00</u>	Expenditures \$, , 0 . 00					
¥	t 100 00	<u> </u>					
Loar	s , <u>100</u> . <u>00</u>	Transfers to Office Account \$					
Tato	\$ 100 00	Office Account \$, , , 0 . 00					
Tota	al Monetary \$, , <u>100</u> . <u>00</u>	Total Monetary \$, 0 . 00					
اب الا	• • • • •	Total Monetary \$, , , 0 . 00					
In-Ki	ind \$,,,0 . <u>00</u>	(O) Other Distributions					
		(8) Other Distributions \$, , 0.00					
		\$,, <u>0</u> 0					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
	\$,, <u>100</u> 00	\$, , <u>0</u> . <u>00</u>					
	(11) Cert It is a first degree misdemeanor for any pers						
1							
I certify that I have examined this report and it is true, correct, and complete:							
_(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
X		X					
Si	ignature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Fonda Demetrius Dav	is, S	r		2) I.D. Numbe	er	202
	4/1/2020		4	/30/2020			
(3) Cover Perio	od//	thro	ough	11_	(4) Pag	le	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	C _i Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
4/9/2020	Peoples South Bank,	S	county department head	LO	Description	Add	\$100.0
1	Apalachicola, FL 32320		liead				
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1 1							
1 1							

(1) Name Fonda	CAMPAIGN TREASURER'S R Demetrius Davis, Sr	(2	EXPENDIT 2) I.D. Number		202
(3) Cover Period	4/1/2020 4/1 	30/2020 _//(4	1) Page <u>1</u>	of_	0
(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)	(11) Amount
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DC.	DE	11	/Pov	11/13	1