CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) David Rich	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1205071]							
(2) 2124 Lake Grove Rd	Submitted on:							
Address (number and street) Wewahitchka, FL 32465	4/28/2020 22:48:34 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: <u>304</u>							
(4) Check appropriate box(es):								
<ul> <li>Candidate Office Sought: <u>County Commission Dist 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> <li>Check here if PTY has disbanded</li> <li>Check here if no other IE or EC reports will be filed</li> </ul>								
(5) Report Identifiers								
Cover Period: From <u>2</u> / <u>1</u> / <u>2020</u> To	2 / <u>29</u> / <u>2020</u> Report Type: <u>M2</u>							
🖾 Original 🔄 Amendment 🔄 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , <u>500</u> . <u>00</u>	Monetary Expenditures \$ , , , 0 . 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to           Office Account         \$							
Total Monetary       \$	Total Monetary \$ , , , 0 . 00							
······································	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, <u>500</u> . <u>00</u>	\$,, <u>0</u> . <u>00</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, cor	rect, 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						r	304	
	2/1/2020	2/29/2020						
(3) Cover Perio	od / /	thro			(4) Page	e <sup>1</sup>	of <sup>1</sup>	
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(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name						(1) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount	
	Rich, David C		commissior		loan to		\$500.00	
2/11/2020	po box 613		er		campaign			
, ,	Port St Joe, Fl 32457				from myself			
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	-							
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1 1								
1 1								
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1 1	-							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name David	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name David Rich (2) I.D. Number 304							
	2/1/2020 2/ <i>I</i> through		4) 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) Amendment	(11) Amount			
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