

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Rich  
 Name  
 (2) 2124 Lake Grove Rd  
 Address (number and street)  
Wewahitchka, FL 32465  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1212196]

Submitted on:  
 6/19/2020 14:47:05 (eastern)

Check here if address has changed (3) ID Number: 304

(4) Check appropriate box(es):

Candidate Office Sought: County Commission Dist 1

Political Committee (PC)  Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO)  Check here if PTY has disbanded

Party Executive Committee (PTY)  Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

### (5) Report Identifiers

Cover Period: From 1 / 1 / 2020 To 9 / 15 / 2020 Report Type: P-TR

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        ,        , 500 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 500 . 00

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        ,        , 500 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        ,        , 500 . 00

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

**X** \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

**X** \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name David Rich (2) I.D. Number 304

1/1/2020 through 9/15/2020

(3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type      Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name David Rich

(2) I.D. Number 304

(3) Cover Period 1/1/2020 through 9/15/2020

(4) Page 1 of 1

(5) Date	(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
(6) Sequence Number					
4/20/2020 / /	SOE, 401 Long Ave PSJ, FL 32456	petition verification	MO		\$2.10
1					
2/18/2020 / /	Emerald Coast Credit Union, 502 Woodward Ave PSJ, FL 32456	check fee	MO		\$15.36
2					
6/19/2020 / /	David Rich, 2124 Lake Grove Rd Wewa, FL 32465	repayment of loan	MO		\$482.54
3					
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