	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Richard "Richie" McCoy	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	2140 NW 86th Blvd	Submitted on:						
	Address (number and street)	4/29/2020 09:14:54 (eastern)						
	Jasper, FL 32052							
	City, State, Zip Code	(2) 12 11 12 12 22						
	Check here if address has changed	(3) ID Number:89						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: County Commiss	sioner District 5						
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	inications Org. (ECO)						
		20 A						
	☐ 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 4 / 1 / 2020 To							
		ecial Election Report						
		T						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , 350 . 00		Monetary Expenditures \$, , 0 . 00						
Casi	h & Checks \$, , <u>350</u> . <u>00</u>	Expenditures \$, , 0 . 00						
Loans \$, , 0.00 Transfers to								
_		Office Account \$, , 0 . 00						
Tota	otal Monetary \$, , 350 . 00							
		Total Monetary \$, , 0 . 00						
In-Ki	ind \$, , 0.00							
		(8) Other Distributions						
	1	\$,,,000						
(0)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(9)								
	\$,, _41000	\$, , <u>1</u> . <u>60</u>						
	(11) Cert							
	It is a first degree misdemeanor for any perso	on to falsify a public record (ss. 839.13, F.S.)						
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:						
(T	ype name)	(Type name)						
-	Individual (only for IE Treasurer Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC and PTY)						
or	electioneering comm.)							
х		×						
	ignature	Signature						

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name		" <i>;</i>	#34; McCoy (2) I.D. Number89						
(3) Cover Per	4/1/2020 riod / /	thr		/30/2020 ///	(4) Pag	je <u>1</u>	of		
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	3.00	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount		
4/20/2020 / /	Holman, Inc , 1225 Ellis Road South Jacksonville, FL 32205		owner/oper ator holman, i		·		\$250		
4/20/2020 / /	MCCOY, RICHARD D 2140 NW 86TH BLVD JASPER, F1 32052	S		CA			\$100		
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4/1/2020 4/		1) Page 1	of	0
			No.	
Full Name	Purpose	(9)	(10)	(11)
Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amoun
	/ / through (7) Full Name (Last, Suffix, First, Middle) Street Address &	(7) (8) Full Name Purpose (Last, Suffix, First, Middle) Street Address & contribution to a	/ / through / / (4) Page 1 (7) (8) (9) Full Name Purpose (add office sought if Street Address & contribution to a Expenditure	/ / through / / (4) Page 1 of (7) (8) (9) (10) Full Name Purpose (add office sought if Street Address & contribution to a Expenditure