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)	6/26/2020 10:29:29 (eastern)							
	Jasper, FL 32052 City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 89							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: County Commissioner District 5 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed								
	(5) Report	Identifiers							
Cove	er Period: From 6 / 13 / 2020 To								
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , 000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , 000	Total Monetary \$, , 243 . 86							
In-Ki	and \$,,,000								
		(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$,, 91000								
(T	(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								
<u>X</u>		X							
51	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Richard " Richie" McCoy (2) I.D. Number 89							
	6/13/2020 od////		6	/26/2020	(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8)	(9)	(10)	(11)	(12)
Number / /	City, State, Zip Code	Туре	Occupation	Туре	Description	Alleidileit	Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Richard	" <i>i</i>	Richi	e" McC	oy	998 708 718	 (2) I.D. Nun	nber	8	39	and an analysis of the same an
	(5/13/2	020		6/26/20	020					
(3) Cover P	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
6/26/2020	Custom Illusionz, Custom 319 E Howard St Live Oak, FL 32060	sign's	МО		\$243.86
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DS-DE 14 (Rev.	4442 ¥)		