| CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | | | | |
|-------------------------------------|---|---|--|--|--|--|--|--|--|
| (1) | Emma J. Byrd | OFFICE USE ONLY | | | | | | | |
| | Name | ONLINE SUBMISSION | | | | | | | |
| (2) | 1105 Mississippi Avenue | Submitted on: | | | | | | | |
| | Address (number and street) | 11/23/2020 13:41:01 (eastern) | | | | | | | |
| | Clewiston, FL 33440 City, State, Zip Code | <u> </u> | | | | | | | |
| | ☐ Check here if address has changed | (3) ID Number: 130 | | | | | | | |
| (4) | _ | (3) ID Number:130 | | | | | | | |
| (4) | Check appropriate box(es): Candidate Office Sought: County Commission District 1 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 | | | | | | | |
| | er Period: From 7 / 25 / 2020 To | 7 / 31 / 2020 Report Type: P6 | | | | | | | |
| 0 | 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 \$,, | Total Monetary \$, , , 80 | | | | | | | |
| In-Ki | and \$,, <u>0</u> . <u>00</u> | | | | | | | | |
| | | (8) Other Distributions \$, , 000_ | | | | | | | |
| (9) | (9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc | | | | | | | | |
| (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 | | | | | | | | |
| _X Si | gnature | X Signature | | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name | Emma J. Byrd | | | | 2) I.D. Numbe | Y r 1 | 30 |
|-----------------|---------------------------------------|-----------|------------|--------------|---------------|----------------|-----------------|
| | 7/25/2020 | | 7 | /31/2020 | | | |
| (3) Cover Perio | od / / | thro | | | (4) Pag | e ¹ | of ⁰ |
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| (5) | (7) | | (8) | (9) | (10) | (11) | (12) |
| Date | Full Name | | (0) | (5) | (.0) | X = 10 | (12) |
| (6) | (Last, Suffix, First, Middle) | | | | | | |
| Sequence | Street Address & | Co | ntributor | Contribution | In-kind | | |
| Number | City, State, Zip Code | Туре | Occupation | Туре | Description | Amendment | Amount |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name _E | Imma | J. | Byrd | | | | | (2) I.D. Nun | nber |] | L30 | and an artist of the second |
|--------------|-------|----|--------|-----|---------|--------|-----|------------------|------|----|-----|-----------------------------|
| | | 7 | //25/2 | 020 | | 7/31/2 | 020 | | | | | |
| (3) Cover Pe | eriod | | 1 | 1 | through | 1 | 1 | (4) Page | 1 | of | 1 | |

| (5) | (7) | (8) | (9) | (10) | (11) |
|---------------------------|---|---|---------------------|-----------|----------|
| (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 |
| 7/28/2020 | NPR, 2401 Grechen Ave. South Lehigh Acres, Fl 33973 | incoice 6414, four signs | RE | Delete | \$149.80 |
| 7/28/2020 | NPR, 2401 Grechen Ave. South Lehigh Acres, Fl 33973 | incoice 6414, four signs | RE | Add | \$0.00 |
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