

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY
ONLINE SUBMISSION
 [1226145]

Submitted on:
 8/14/2020 16:34:24 (eastern)

(1) _____
 Name
 (2) P O Box 261
 Address (number and street)
LaBelle, FL 33975
 City, State, Zip Code

Check here if address has changed

(3) ID Number: 145

(4) Check appropriate box(es):

- Candidate Office Sought: School Board District 2
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 1 / 2020 To 8 / 14 / 2020 Report Type: P7

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 \$ _____ , _____ , 13 . 00

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 13 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 2 , 010 . 00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 640 . 23

(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 _____ (2) I.D. Number 145

(3) Cover Period 8/1/2020 / 8/14/2020 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
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _____

(2) I.D. Number 145

(3) Cover Period 8/1/2020 through 8/14/2020

(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					
8/10/2020 //	Facebook, Ads 1 Hacker Ave Menlo Park, CA 94025	ads	MO		\$8.00
1					
8/12/2020 //	Facebook, Ads 1 Hacker Ave Menlo Park, CA 94025	ads	MO		\$5.00
2					
//					
//					
//					
//					
//					
//					
//					