CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1) Donald Hughes	OFFICE USE ONLY							
Name (2)	ONLINE SUBMISSION [1240810]							
Address (number and street)	Submitted on:							
 City, State, Zip Code	12/22/2020 10:51:46 (eastern)							
Check here if address has changed	(3) ID Number:163							
(4) Check appropriate box(es):								
 Candidate Office Sought: <u>Clewiston City Commission</u> 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								
Cover Period: From <u>10</u> / <u>31</u> / <u>2020</u> To ☑ Original ☐ Amendment ☐ Sp.								
	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report Monetary							
Cash & Checks \$,,,	Expenditures \$,,,							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$, , 0 . 00							
Total Monetary \$,,,	Total Monetary \$, , 0 . 00							
In-Kind \$,, 000								
	(8) Other Distributions \$,, 00							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, <u>100</u> . <u>00</u>	\$,, <u>100</u> . <u>00</u>							
(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, con	rect, and complete:							
(Type name)	(Type name)							
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
X	X							
Signature	Signature							

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number					6.3		
	10/31/2020			/1/2021			
(3) Cover Perio	od/ /	thro	- bugh	1 1	(4) Paq	e 1	of ⁰
					_ () 0	1 1 1	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name			x	(N 58767)		
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
1 1							
1 1							
			-				
1 1							
	-						
1 1							
	-						
1 1							
	-						
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPEND (1) Name Donald Hughes (2) I.D. Num							
(3) Cover Period	10/31/2020 d/_/through	2/1/2021 /	(4) Page <u>1</u>	of_	1		
(5) Date (6) Sequence Number	(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		
12/22/2020 1	HUGHES, DONALD Candidate to Candi Themselves 219 W AVENIDA DEL RIO CLEWISTON, FL 33440	reimbursment for flyers- to close account	DI		\$52.00		
//							
//							
_ / /							
11							
11							
11							

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES