	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Indian River Conservatives for Better Name	OFFICE USE ONLY ONLINE SUBMISSION [1245416]						
(2)	P.O. Box 7111	Submitted on:						
	Address (number and street) Vero Beach, FL 32966	4/21/2021 18:22:57 (eastern)						
	City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 299						
(4)	Check appropriate box(es):	(*)						
(-)	Candidate Office Sought: ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PC or ECO has disbanded ☐ 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 $\frac{4}{2}$ / $\frac{1}{2}$ / $\frac{2021}{2021}$ To	4 / 30 / 2021 Report Type: M4						
X O	riginal Amendment Sp	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$,,, , Monetary Expenditures \$,,,								
Loar		Transfers to Office Account \$, , , 0 . 00						
	I Monetary \$,,	Total Monetary \$, , 0 . 00						
In-Ki	nd \$, , , 0 . 00	(0) Other Distributions						
		(8) Other Distributions \$, , 000						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$, <u>24</u> , <u>676</u> . <u>26</u>						
	It is a first degree misdemeanor for any persertify that I have examined this report and it is true, con	I						
	ype name) Individual (only for IE	(Type name) ☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		×						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name								
(3) Cover Perio	od////	thro	ough	/30/2021 //	(4) Pag	je <u>1</u>	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
J J								
1 1								
1 1								
J I								
I I								
J I								
J I								
1 1								

/ / through (7) Full Name	(8)	l) Page 1	of	0
Full Name	(8)	(0)		
(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11) Amount
-				

DS-DE	14 /	Rev	11/13	١