CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Indian River Conservatives for Bette						
	Name	ONLINE SUBMISSION					
(2)	P.O. Box 7111	Submitted on:					
	Address (number and street)	6/30/2021 11:36:59 (eastern)					
	Vero Beach, FL 32966						
	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)	☐ Check here if PC or ECO has disbanded					
	Party Executive Committee (PTY)	Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) Repor	t Identifiers					
Cove	er Period: From 6 / 1 / 2021 To	6 / 30 / 2021 Report Type: M6					
		ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
(0)	Contributions This Report						
Cash	n & Checks \$, , 0 . 00	Monetary Expenditures \$, , 0 . 00					
Ouoi	7 4 6110010						
Loar	ns \$,,000	Transfers to					
		Office Account \$, , 0 . 00					
Tota	I Monetary \$, , 000						
		Total Monetary \$, , 0 . 00					
In-Ki	nd \$, , 0 . <u>00</u>						
		(8) Other Distributions					
		\$,,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
. ,	\$, _25_, _05000	\$, <u>24</u> , <u>676</u> . <u>26</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, correct, and complete:							
(T	ype name)	(Type name)					
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
<u>X</u>		X					
Si	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name							
(3) Cover Peri	6/1/2021 od//		5/30/2021	(A) Par	1 1	of ⁰	
-		T			,		
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)	
(6)	(Last, Suffix, First, Middle)						
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount	
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-	n River Conservatives for 6/1/2021 6/	30/2021	2) I.D. Numbei 1) Page1	145	0
(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)	(11)
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DS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							