	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Indian River Conservatives for Better								
	Name	ONLINE SUBMISSION							
(2)	P.O. Box 7111	Submitted on:							
	Address (number and street)	8/15/2022 17:08:18 (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) Report	dentifiers							
Cove	er Period: From 8 / 6 / 2022 To								
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
	Φ	Monetary							
Casl	h & Checks \$ , , 0 . 00	Expenditures \$ , ,0 . 00							
Loar	s \$,_,,_000	Transfers to							
Luai	,,,	Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , 0 . 00	,,,							
. 0.0	, monotary	Total Monetary \$ , , 0 . 00							
In-Ki	ind \$ , , 0.00	, , , , , , , , , , , , , , , , , , , ,							
	, / /	(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>							
	(11) Cer	I tification							
		on to falsify a public record (ss. 839.13, F.S.)							
Ιc	certify that I have examined this report and it is true, corr	rect, and complete:							
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		<u>X</u>							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name								
(3) Cover Perio	8/6/2022 od////	through	8/18/2022 _ / /	(4) Pag	ge <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	Contributor Type Occupation	Contribution n Type	In-kind Description	Amendment	Amount		
1 1								
1 1								
1 1								
1. 1								
1 1								
J I								
1 1								
J I								

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	Indian	River	Conse	ervatives	for	Better	Schools	(2) I.D. Nun	nber	2	299	
	8	3/6/202	22		8/1	8/2022						
(3) Cover Pe	eriod	I	1	through		1 1		(4) Page	1	of	0	

(5) Date	(7) Full Name	(8)	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
//					
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