	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Scott Edwards	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	Protected (Law Enforcement)	Submitted on:							
	Address (number and street)	8/14/2020 09:44:56 (eastern)							
	City, State, Zip Code								
	_	(0) 17)							
	Check here if address has changed	(3) ID Number: 298							
(4)	Check appropriate box(es):								
									
	☐ 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							
	marriada making dissilonsering communications)								
	(5) Report	dentifiers							
Cove	er Period: From $8 / 1 / 2020$ To	8 / 13 / 2020 Report Type: <u>P7</u>							
X O	riginal Amendment Sp	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$,, <u>200</u> . <u>00</u>	Monetary							
Loar	s , , , , 000	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , <u>200</u> . <u>00</u>	Total Monetary \$, , 262 . 45							
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							
	\$, <u>12</u> , <u>811</u> . <u>54</u>	\$, <u>12</u> , <u>602</u> . <u>08</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:									
(Type name) (Type name)									
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		x							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Scott Edwards			s 1	z) I.D. Numbe	:r"2	.98
	8/1/2020		8	/13/2020		-	1
(3) Cover Peri	od / /	thro	ough	<i>I I</i>	(4) Pag	e	of
		T	Y				
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)		SERVICE DE LA PRODUCTION DE SERVICE	0	Barra (Princepola)		
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	8
Number	City, State, Zip Code Edwards, Scott	Type S	Occupation law	Type CH	Description	Amenament	Amount \$200.0
8/7/2020	protected		raw enforcemer				\$200.00
1 1	Marianna, Fl 32446		t	-			
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _S	cott	Edward	ls	111			7710	77.17	 (2) I.D. Nur	nber	2	298	
		8/1/2	02	0		8/	13/2	020	~ ~				
(3) Cover Pe	eriod	1		1	through		1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
8/7/2020	Lightning Graphics, 4523 Lafayette St Marianna, Fl 32446	shirts	МО		\$199.95
8/11/2020	Jackson County Times, 2866 Madison St Marianna, Fl 32446	ads	MO		\$62.50
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