

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Paul A. Donofro, Jr.

Name

(2) PO BOX 861

Address (number and street)

Marianna, FL 32446

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 360

OFFICE USE ONLY

ONLINE SUBMISSION

[1310754]

Submitted on:

6/18/2024 12:00:56 (eastern)

(4) Check appropriate box(es):

☒ Candidate Office Sought: County Commissioner District 3

☐ 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

Cover Period: From 6 / 1 / 2024 To 6 / 14 / 2024 Report Type: P1

☒ Original

☐ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 500 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 500 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 10 , 550 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 6 , 495 . 07

(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)

☐ Individual (only for IE or electioneering comm.) ☐ Treasurer ☐ Deputy Treasurer

X

Signature

(Type name)

☐ Candidate ☐ Chairperson (only for PC and PTY)

X

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Paul A. Donofro, Jr. (2) I.D. Number 360
 6/1/2024 6/14/2024
 (3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
6/13/2024 / /	Bowden, Andrew L 995 Strickland Road Marianna, FL 32448	I	retired	CH			\$250.00
1							
6/13/2024 / /	Jackson , Erwin P O Box 4008 Tallahassee, FL 32315	I	business owner	CH			\$250.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Paul A. Donofro, Jr.

(2) I.D. Number 360

(3) Cover Period 6/1/2024 through 6/14/2024

(4) Page 1 of 0

(5) Date	(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
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