

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Brian N. Lamb  
Name

(2) 213 NE Lantana Rd.  
Address (number and street)

Branford, FL 32008  
City, State, Zip Code

OFFICE USE ONLY

REC'D SEP 08 2020

Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

Candidate Office Sought: Sheriff

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 8 / 22 / 20 To 9 / 4 / 20 Report Type: G2

Original

Amendment

Special Election Report

(6) Contributions This Report \$8,562.55

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_

In-Kind \$ \_\_\_\_\_

(7) Expenditures This Report \$6,613.66

Monetary Expenditures \$ \_\_\_\_\_, 238. 00

Transfers to Office Account \$ \_\_\_\_\_

Total Monetary \$ \_\_\_\_\_, 238. 00

(8) Other Distributions

\$ \_\_\_\_\_

(9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_, 8,562. 55

(10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_, 6,851. 46

### (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) Brian N. Lamb

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

X Brian N. Lamb  
Signature

(Type name) Brian N. Lamb

Candidate  Chairperson (only for PC and PTY)

X Brian N. Lamb  
Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Brian N Lamb

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 8 / 22 / 20 through 9 / 14 / 20

(4) Page 1 of 1

| (5)<br>Date               | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Purpose<br>(add office sought if<br>contribution to a<br>candidate) | (9)<br>Expenditure<br>Type | (10)<br>Amendment | (11)<br>Amount |
|---------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------|-------------------|----------------|
| (6)<br>Sequence<br>Number |                                                                                                |                                                                            |                            |                   |                |
| 8 / 24 / 20               | Riverbend News<br>P.O. Box 6034<br>Live Oak, FL 32064                                          | Thank you<br>Ad.                                                           |                            |                   | 238.00         |
| 1                         |                                                                                                |                                                                            |                            |                   |                |
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| / /                       |                                                                                                |                                                                            |                            |                   |                |

**CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Brian N. Lamb (2) I.D. Number \_\_\_\_\_

(3) Cover Period 8 / 22 / 20 through 4 / 4 / 20 (4) Page 1 of 1

| (5)<br>Date | (7)<br>Full Name<br>(Last, Suffix, First, Middle)<br>Street Address &<br>City, State, Zip Code | (8)<br>Contributor |            | (9)<br>Contribution | (10)<br>In-kind | (11)<br>Amendment | (12)<br>Amount |
|-------------|------------------------------------------------------------------------------------------------|--------------------|------------|---------------------|-----------------|-------------------|----------------|
|             |                                                                                                | Type               | Occupation | Type                | Description     |                   |                |
| / /         |                                                                                                |                    |            |                     |                 |                   |                |
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