CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Carey Baker	OFFICE USE ONLY								
` ,	Name	ONLINE SUBMISSION								
(2)	244 Blue Branch St.	[1195864]								
	Address (number and street)	Submitted on:								
	Eustis, FL 32736	12/9/2019 11:54:04 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:350								
(4) Check appropriate box(es):										
	 ☐ Candidate Office Sought: Property Appraiser ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ 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 									
	(5) Report	Identifiers								
Cove	er Period: From $11 / 1 / 2019$ To	11 / 30 / 2019 Report Type: M11								
X o	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casł	n & Checks \$, , <u>750</u> . <u>00</u>	Monetary								
Loar	s , , , , 000	Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , <u>750</u> . <u>00</u>	Total Monetary \$, , 250 . 00								
In-Ki	nd \$,,,0 . 00									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>4</u> , <u>250</u> . <u>00</u>	\$, <u>1</u> , <u>308</u> . <u>60</u>								
<u>(T</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) Individual (only for IE Treasurer Deputy Treasurer Candidate Chairperson (only for PC and PTY)									
Oi	electioneering comm.)									
X		<u>X</u>								
Sig	gnature	Signature								

(1) Name	Carey Baker			2) I.D. Numbe	er	350	
	11/1/2019	11/30/2019		1			
(3) Cover Peri	iod / /	through	11	(4) Pag	e <u> </u>	of <u></u>	
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount	
11/19/2019	Belton, Frederick 525 W Main St Tavares, FL 32778	I insurance	СН	***		\$500	
1							
11/19/2019	Harden/Pauli Funeral Home, 1617 S Bay St Eusts, FL 32727	B funeral home	СН			\$250	
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Care	y Baker	•					 (2) I.D. Nur	nber		350	300
	11/1	/203	19		11/30/	2019					
(3) Cover Period	I		1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
11/1/2019	South Lake Chamber of Commerce, 620 Montrose St Clermont, fl 34711	advertising	МО		\$250.00
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DS-DE 14 (Rev.	(44(2))			<u> </u>	,