CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Anthony DeMarco	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	2305 Killearn Center Blvd Apt D81	Submitted on:							
	Address (number and street)	6/24/2022 23:57:04 (eastern)							
	Tallahassee, FL 32309 City, State, Zip Code								
	_	(0) ID N							
	Check here if address has changed	(3) ID Number: 637							
(4)	Check appropriate box(es):								
	Candidate Office Sought: Leon County S	chool Board - District 1							
	☐ 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							
		☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	Identifiers							
Cove	er Period: From 6 / 1 / 2022 To	6/17/2022 Report Type: 22P1							
X O	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$,,,	Monetary							
Loar	s , , , ,	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$, , , 000								
In-Ki	ind \$, , 0.00	Total Monetary \$,1 , 634 . 00							
III-IXI	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions							
		\$, , 000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$	\$, <u>3</u> , <u>021</u> . <u>25</u>							
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)									
lo	I certify that I have examined this report and it is true, correct, and complete:								
_(T	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		_X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name			(2) I.D. Number 637							
	6/1/2022			/17/2022						
(3) Cover Perio	od / /	thro	ough	11_	(4) Page	1	of			
-				r		ž				
(5)	(7)		(8)	(9)	(10)	(11)	(12)			
Date	Full Name									
(6)	(Last, Suffix, First, Middle)		everballe automo	Canadanaia	For 120ccst					
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution	In-kind Description	Amendment	Amount			
Number	City, State, Zip Code	Type	Occupation	Туре	Description	3 ariendinene	Amount			
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Anthony	DeMar	CO	n systematical control of the contro	10000000 00000 00000 00000000000000000	20 99 10	 (2) I.D. Nun	nber		537	- P
	6	/1/202	22		6/17/20	22					
(3) Cover P	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
6/14/2022	Supervisor of Elections, 2990-1 Apalachee Parkway Tallahassee, FL 32301	qualifying fee	МО		\$1,634.00
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