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) Tallahassee, FL 32309	7/29/2022 23:43:11 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 637						
_							
<ul> <li>(4) Check appropriate box(es):</li> <li></li></ul>							
(5) Report Identifiers							
Cover Period: From <u>6</u> / <u>1</u> / <u>2022</u> To	6 / <u>17</u> / <u>2022</u> Report Type: <u>22P1</u>						
🗌 Original 🛛 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report (7) Expenditures This Report							
Cash & Checks \$ , , , 000	Monetary Expenditures \$,3 , <u>268</u> . <u>00</u>						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,000						
Total Monetary       \$	Total Monetary \$, <u>-3</u> , <u>268</u> . <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>4</u> _, <u>737</u> . <u>00</u>	\$, <u>1</u> , <u>537</u> . <u>63</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 Candidate Chairperson (only for PC or electioneering comm.)							
X	x						
Signature	Signature						

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	I) Name (2) I.D. Number						637
	6/1/2022			/17/2022		7	0
(3) Cover Peri	od / /	thro	bugh	11	(4) Pag	e _⊥	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
	3)			50-50 a G			
/ /	_						
1 1							
1 1	_						
1 1	_						
1 1	_						
1 1	_						
1 1	_						
1 1	-						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Anth			2) I.D. Number		637
(3) Cover Perio	6/1/2022 d/_/through	6/17/2022 / <u>/</u> /	4) Page <u>1</u>	of_	1
(5) Date (6) Sequence Number	(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
6/14/2022 1	Supervisor of Elections, 2990-1 Apalachee Parkway Tallahassee, FL 32301	qualifying fee	МО	Delete	\$1,634.00
6/14/2022 // 2	Supervisor of Elections, 2990-1 Apalachee Parkway Tallahassee, FL 32301	qualifying fee	МО	Add	\$0.00
6/14/2022	Supervisor of Elections, 2990-1 Apalachee Parkway Tallahassee, FL 32301	qualifying fee	МО	Delete	\$1,634.00
6/14/2022	Supervisor of Elections, 2990-1 Apalachee Parkway Tallahassee, FL 32301	qualifying fee	МО	Add	\$0.00
_/ /					
//					
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES