CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Nathan Foote	OFFICE USE ONLY							
` ,	Name	ONLINE SUBMISSION							
(2)	1450 NW Hwy 27 Alt	Submitted on:							
	Address (number and street)	6/13/2018 10:56:15 (eastern)							
	Chiefland, FL 32626								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:238							
(4)	Check appropriate box(es):								
	Candidate Office Sought: County Commiss	sion Dist. 4							
	Political Committee (PC)	Charlebone is DC as ECO has disbonded							
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an	☐ 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 / 2018 To								
		ecial Election Report							
		ı .							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	h & Checks \$, , ,000	Monetary							
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00							
Tota	Il Monetary \$, , , 0 . <u>00</u>	Total Monetary \$, , 180 . 00							
In-Ki	ind \$, , 0.00								
		(8) Other Distributions							
		\$,, <u>0</u> 00							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,, <u>200</u> . <u>00</u>	\$, , <u>200</u> . <u>00</u>							
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)									
Ιc	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		×							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Nathan Foote		(2) I.D. Number							
	6/1/2018		6	/22/2018						
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	e <u>1</u>	of			

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)			
(6)	(Last, Suffix, First, Middle)									
Sequence	Street Address &	Co	ontributor	Contribution	In-kind					
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount			
1										
1 1										
9 5										
1 1										
1										
1 1										
1 1										
1 1										
<i>y</i> •										
1 1										

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Nathan Foote					 (2) I.D. Number			238		
		6/1/20	18		6/22/20	018					
(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
6/11/2018	Capital City, 2012 N Young Blvd Chiefland, Fl 32626	bank fee (account closing fee)	MO		\$25.00
6/13/2018	Foote, Nathan 6690 NW 80th St Chiefland, FL 32626	close campaign account	MO		\$155.00
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