CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Matt Brooks	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	547 NW 3rd Ave	Submitted on:							
	Address (number and street) Williston, FL 32696	5/8/2020 18:32:34 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 250							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: County Commission Dist. 5 ☐ 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 ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 								
	(5) Report	dentifiers							
Cov	er Period: From $4 / 1 / 2020$ To								
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , ,000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , , 000	Total Monetary \$, , 41 . 00							
In-Ki	ind \$,, <u>0</u> . <u>00</u>								
		(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T	(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								
X		X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Matt Brooks				2) I.D. Numbe	er	250
	4/1/2020		4	/30/2020			
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _M	att Br	ooks					 (2) I.D. Nur	nber	2	250	
	4	/1/20	20		4/30/20	20	**				
(3) Cover Pe	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
1	Superviors of Elections, 421 S Court St Bronson, FL 32621	petition cards	MO		\$16.60
4/21/2020	Superviors of Elections, 421 S Court St Bronson, FL 32621	petitions	MO		\$7.80
4/22/2020	Supervisor of Elections, 421 S Court St Bronson, FL 32621	petitions	МО		\$16.60
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