CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Matt Brooks	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1219525]						
(2) 547 NW 3rd Ave Address (number and street)	Submitted on:						
Williston, FL 32696	7/24/2020 11:51:10 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 250						
(4) Check appropriate box(es):							
Image: Candidate Office Sought: County Commission Dist. 5 Image: Political Committee (PC) Image: Party Executive Communications Org. (ECO) Image: Check here if PC or ECO has disbanded Image: Party Executive Committee (PTY) Image: 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							
Cover Period: From $6 / 1 / 2020$ To							
	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$, , , 0 . 00	Expenditures \$,, 59 . 00						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,0 . 00						
Total Monetary \$	Total Monetary \$,, 59 . 00						
	(8) Other Distributions						
	\$,,000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>100</u> . <u>00</u>	\$,, <u>100</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.)							
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 or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
x	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	(1) Name <u>Matt Brooks</u>				(2) I.D. Number				
	6/1/2020			9/10/2020					
(3) Cover Per	iod / /	thro	bugh	<i>ll</i>	(4) Page	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) 460 Q								
1 1	_								
1 1									
1 1									
1 1									
1 1									
1 1									
1 1						-			

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Matt	CAMPAIGN TREASURER' Brooks	() EXPENDIT 2) I.D. Number	250	
(3) Cover Period	6/1/2020 // through_	9/10/2020	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
	Brooks, Matthew 547 NW 3rd Ave Williston, FL 32696	campaign account closeout	МО		\$59.00
_/ /					
_/ /					
_/ /					
_/ /					
11					
11					
11					

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES