CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Dewayne "Bubba" Branch	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1201013]							
(2) 4935 NW County Road 270	Submitted on:							
Address (number and street) Bristol, Fl 32321	3/5/2020 16:31:29 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: <u>165</u>							
_								
<ul> <li>(4) Check appropriate box(es):</li> <li>Candidate Office Sought: Member, Board of County Commissioners, Dist. 1</li> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Check here if PTY has disbanded</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>								
(5) Report Identifiers								
Cover Period: From <u>2</u> / <u>1</u> / <u>2020</u> To	2 / <u>29</u> / <u>2020</u> Report Type: <u>M2</u>							
☑ Original      ☑ Amendment      ☑ Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , , 25 . 00	Monetary Expenditures \$,,, 80							
Loans \$,, <u>0</u> .00	Transfers to           Office Account         \$							
Total Monetary       \$	Total Monetary \$ , , , 80							
	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, <u>5</u> . <u>00</u>	\$,, <u>4</u> . <u>80</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, con								
(Type name)	(Type name)							
X	x							
Signature	Signature							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Dewayne "Bubba&	#34; Branch (2) I.D. Number <u>165</u>					
	2/1/2020		2	/29/2020		1	
(3) Cover Peri	od / /	thro	ough	11_	(4) Page	• <u> </u>	of
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
2/3/2020	BRANCH, DEWAYNE		commission		open		\$25.0
1 1	***Protected Voter***		er/inspect or		account		
1							
1 1	_						
1 1							
1 1		8					
1 1							
1 1							
1 1							
1 1							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Dewa	<b>CAMPAIGN TREASURER'</b> yne "Bubba" Bran	ich	D EXPENDIT (2) I.D. Numbei		165
(3) Cover Period	2/1/2020 // through_	2/29/2020 //	(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
	SUPERVISOR OF ELECTIONS, 10818 NW STATE ROAD 20 BRISTOL, FL 32321	, verify petitions	MO		\$4.80
_/ /					
_/ /					
_/ /					
_/_/					
_/_/					
11					
_/ /					

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES