CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1) Brenda Green	OFFICE USE ONLY ONLINE SUBMISSION							
(2)	[1209942]							
Address (number and street)	Submitted on: 6/10/2020 19:04:07 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 175							
(4) Check appropriate box(es):								
 (4) Check appropriate box(es): Superintendent of Schools Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed 								
(5) Report	t Identifiers							
Cover Period: From <u>5</u> / <u>1</u> / <u>2020</u> To	5 / <u>31</u> / <u>2020</u> Report Type: <u>M5</u>							
☑ Original ☐ Amendment ☐ Spectrum	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$,, 0.00	Monetary Expenditures \$							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,0.00							
Total Monetary \$	Total Monetary \$, , , , 60							
	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date \$,,,00_	(10) TOTAL Monetary Expenditures To Date \$,,,							
	tification son to falsify a public record (ss. 839.13, F.S.)							
(Type name)	(Type name)							
X	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Brenda Green	(2) I.D. Number					.75	
	5/1/2020			5/31/2020				
(3) Cover Perio	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	
1 1	-							
/ /	_							
/ /	-							
1 1	_							
1 1	-							
JI								
1 1								
/ /								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Bren	CAMPAIGN TREASURER'	(2) EXPENDIT 2) I.D. Number	175	
(3) Cover Period	5/1/2020 I/through_	5/31/2020	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
	LC Supervisor of Elections, 10818 NW ST Road 20 Bristol, FL 32321	petitions	PW		\$4.60
_/ /					
_/ /					
_/ /					
_/ /					
//					
11					

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