CAMPAIGN TREASURI	ER'S REPORT SUMMARY							
(1) Curtis Fletcher	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1222450]							
(2) <u>17163 NW County Road 67A</u>	Submitted on:							
Address (number and street)	8/3/2020 08:17:57 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 184							
<ul><li>(4) Check appropriate box(es):</li></ul>								
Candidate Office Sought: Clerk of the	Circuit Court							
Political Committee (PC)								
Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded							
Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an	<ul> <li>Check here if PTY has disbanded</li> <li>Check here if no other IE or EC reports will be filed</li> </ul>							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From 7 / 18 / 2020 To								
	pecial Election Report							
	T							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , 0.00	Monetary           Expenditures         \$							
Loans \$,,00	Transfers to							
	Office Account \$,, 0 . 00							
Total Monetary \$,, 0 . 00								
• • • • • • • • • • • • • • • • • • • •	Total Monetary \$ , , , 00							
In-Kind \$,,								
	(8) Other Distributions \$ , 0.00							
	\$, <u> </u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>1</u> , <u>436</u> . <u>00</u>	\$, <u>1</u> , <u>312</u> . <u>00</u>							
(44) 0-	l							
	rtification son to falsify a public record (ss. 839.13, F.S.)							
I certify that I have examined this report and it is true, con	rrect, and complete:							
(Type name)	(Type name)							
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
or electioneering comm.)								
x	x							
Signature	Signature							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Curtis Fletcher	(2) I.D. Number					84
	7/18/2020		7	/24/2020		1	0
(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 1	_						
1 1							
1 1	-						
1 1	-						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name <u>Curt</u>	<b>CAMPAIGN TREASURER'</b> is Fletcher		) EXPENDIT 2) I.D. Number	184	
(3) Cover Period	7/18/2020 // /through_	7/24/2020	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
	USPS, Hosford Post Office Hosford, FL 32334	stamps	MO		\$70.00
_/ /					
_/ /					
_/_/					
_/_/					

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES