CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Madison County Democratic Executive C								
Name	ONLINE SUBMISSION [1303004]							
(2) P.O. Box 964	Submitted on:							
Address (number and street) Madison, FL 32340	1/16/2024 13:56:20 (eastern)							
City, State, Zip Code	—							
Check here if address has changed	(3) ID Number: 118							
(4) Check appropriate box(es):								
Candidate Office Sought:								
Political Committee (PC) Florting or (ECO)	Charle have if DC as 500 has disharded							
	Check here if PC or ECO has disbanded Check here if PTY has disbanded							
Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From 7 / 1 / 2023 To	9 / <u>30</u> / <u>2023</u> Report Type: <u>Q3</u>							
☑ Original □ Amendment □ Spe	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$,, 27	Expenditures \$,, <u>100</u> .00							
Loans \$, , 0.00	Transfers to							
	Office Account \$, , 0 . 00							
Total Monetary \$, , 1 . 27								
	Total Monetary \$, , 100 . 00							
In-Kind \$,, <u>0</u> . <u>00</u>								
	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>26</u> , <u>944</u> . <u>91</u>	\$, <u>24</u> , <u>909</u> . <u>15</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)							
v	v							
X Signature	X Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Madison County Dem	Madison County Democratic Executive Commit (2) I.D. Number							
	7/1/2023	9/30/2023							
(3) Cover Per	iod / /	thro			(4) Page	e _1	of		
(5) Date	(7) Full Name	(8)		(9)	(10)	(11) (12)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code			Contribution Type	In-kind Description	Amendment	Amount		
7/31/2023 / /	Madison County Community Bank, PO Box 834 Madison, FL 32341-0834	B		IN	Description		\$0.4		
8/31/2023 / / 2	Madison County Community Bank, PO Box 834 Madison, FL 32341-0834	В		IN			\$0.4		
9/30/2023 / / 3	Madison County Community Bank, PO Box 834 Madison , FL 32341-0834	В		IN			\$0.4		
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1 1									
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1 1									
1 1									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Mad	CAMPAIGN TREASURER ison County Democratic E	xecutive Committee 👔) EXPENDIT 2) I.D. Number	URES	118
(3) Cover Period	7/1/2023 I/through	9/30/2023 /(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
	North Florida Vickory, PO Box 362 Tallahassee, FL 32302-0362	dcnf sponsorship july 22, 2023 bbq	МО		\$100.00
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