	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Heath Driggers	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	315 NW Settlement Rd	Submitted on:							
	Address (number and street)	4/6/2024 14:33:06 (eastern)							
	Madison, FL 32340								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 123							
(4)	Check appropriate box(es):								
	Candidate Office Sought: Supervisor of	Elections							
	Political Committee (PC)	Check have if DO as EOO have dishearded							
	<ul><li>☐ Electioneering Communications Org. (ECO)</li><li>☐ Party Executive Committee (PTY)</li></ul>	☐ 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							
Cove		3 / 31 / 2024 Report Type: Q1							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , , 000	Monetary							
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , , 0 . 00	Total Monetary \$ , , 42 . 60							
In-Ki	nd \$ , , 0.00								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, ,, , <u>250</u> . <u>00</u>	\$, ,, 42 . 60							
	(11) Cert It is a first degree misdemeanor for any pers	tification							
1		. , ,							
I certify that I have examined this report and it is true, correct, and complete:									
	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Heath Driggers				2) I.D. Numbe	er <u>1</u>	23
	1/1/2024 od////		3	/31/2024 ///	(4) Pag	e	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Contributor		(9) Contribution	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
J I							
1 1							
1 1							
I I							
1 1							
1 1							
J I							

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) NameHe	eath	Drigger	rs				 (2) I.D. Nun	nber		L23	3
		1/1/20	24		3/31/20	024					
(3) Cover Per	riod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
1/11/2024	Supervisor of Elections, 239 SW Pinckney Street Madison, FL 32340	126 petitions to be verified.	MO		\$12.60
1/31/2024	Capital City Bank, P.O. Box 900 Tallahassee, FL 32302	service charge	МО		\$10.00
2/29/2024	Capital City Bank, P.O. Box 900 Tallahassee, FL 32302	service charge	МО		\$10.00
3/29/2024	Capital City Bank, P.O. Box 900 Tallahassee, FL 32302	service charge	МО		\$10.00
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