CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Scott G Boyes	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1228947]							
(2) 2211 50th St W Address (number and street)	Submitted on:							
Bradenton, FL 34209	9/2/2020 11:09:12 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number:1845							
(4) Check appropriate box(es):								
<ul> <li>Candidate Office Sought: MANATEE COUNTY SCHOOL BOARD DIST. 3</li> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> </ul>								
(5) Report Identifiers								
Cover Period: From <u>8</u> / <u>14</u> / <u>2020</u> To	<u>11</u> / <u>16</u> / <u>2020</u> Report Type: <u>TR</u>							
☐ Original								
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , , 000	Monetary Expenditures \$ , , , 0 . 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to           Office Account         \$							
Total Monetary       \$	Total Monetary \$ , , , 0 . 00							
······································	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>4</u> _, <u>985</u> · <u>00</u>	\$, <u>4</u> , <u>985</u> . <u>00</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)							
X	x							
Signature	Signature							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Scott G Boyes</u>				(2) I.D. Number					
8/14/2020			11/16/2020						
(3) Cover Peri	od / /	thro	bugh	<i>ll</i>	(4) Page	e <u>1</u>	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	ALCONTRACTORIAN ACCORDING	Туре	Description	Amendment	Amount		
1 1	-								
1 1	-								
1 1	_								
1 1	-								
1 1	_								
J I	-								
1 1	-								
1 1	_								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name <u>Scot</u>	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES Scott G Boyes (2) I.D. Number				
(3) Cover Period	8/14/2020	11/16/2020 /	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
	Boyes, Scott Gregory 2211 50th Street West Bradenton, FL 34209	repayment of loan	DI		\$816.23
_/ /					
_/_/					
_/ /					
_/ /					
_/ /					
11					
_ / /					

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