

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Robert C Bennett
 Name
 (2) 1612 84th St NW
 Address (number and street)
Bradenton, FL 34209
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1240657]
 Submitted on:
 12/14/2020 07:32:50 (eastern)

Check here if address has changed (3) ID Number: 1914

(4) Check appropriate box(es):
 Candidate Office Sought: WEST MANATEE FIRE DIST SEAT 5
 Political Committee (PC)
 Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
 Party Executive Committee (PTY) Check here if PTY has disbanded
 Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 10 / 30 / 2020 To 2 / 1 / 2021 Report Type: TR
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00
 Loans \$, , 0 . 00
 Total Monetary \$, , 0 . 00
 In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 3 . 00
 Transfers to Office Account \$, , 0 . 00
 Total Monetary \$, , 3 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 1 , 250 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 1 , 250 . 00

(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) _____
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer
X _____
 Signature

(Type name) _____
 Candidate Chairperson (only for PC and PTY)
X _____
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Robert C Bennett (2) I.D. Number 1914
 (3) Cover Period 10/30/2020 through 2/1/2021 (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Robert C Bennett

(2) I.D. Number 1914

(3) Cover Period 10/30/2020 through 2/1/2021

(4) Page 1 of 1

(5) Date	(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
(6) Sequence Number					
10/31/2020 / /	Suntrust Bank, PO Box 305183 Nashville , TN 37230	bank fee	MO		\$3.00
1					
11/30/2020 / /	Sarasota Fire Fighters , Benevolent Fund PO Box 147 Sarasota, FL 34230	donation to 501c3	DI		\$39.89
2					
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