	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	John Joseph Cascone	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1235327]							
(2)	PO Box 1852	Submitted on:							
	Address (number and street)	10/23/2020 10:40:10 (eastern)							
	Fernandina Beach, FL 32035 City, State, Zip Code	<u> </u>							
	_	(2) ID Niverbarr							
	Check here if address has changed	(3) ID Number:549							
(4)	Check appropriate box(es):								
		Judge, Group 1							
	☐ 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							
	marviodal making electioneering communications)								
	(5) Repor	t Identifiers							
Cove	er Period: From $\underline{1}$ / $\underline{1}$ / $\underline{2020}$ To	1 / 31 / 2020 Report Type: M1							
0	riginal 🖾 Amendment 🗌 Sp	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , 0 . <u>00</u>	Monetary							
Loar	s , , , , 0 . <u>00</u>	Transfers to Office Account \$, , 0 . 00							
Tota	I Monetary \$,,	Total Monetary \$, , 0 . 00							
In-Ki	nd \$, ,, <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>115</u> , <u>689</u> . <u>09</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:									
(T ₁	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		x							
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	John Joseph Cascone				2) I.D. Numbe	er	49
	1/1/2020		1	/31/2020		-	0
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e	of 0
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1							
J I							
J J							
1 1							
1 1							
1 1							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	John	Joseph	Ca	scone	310				 (2) I.D. Nur	nber	Į	549	
		1/1/2	202	0		1/31	/20	20					
(3) Cover Po	eriod	I		1	through	1	/	1	(4) Page	1	of	1	

Date (6) Sequence Number Reliant Florida Consulting LLC, 50 N Laura Street #2500 Jacksonville, FL 32034 Full Name (add office sought if contribution to a campaign consultant) Purpose (add office sought if contribution to a candidate) Expenditure Type Amendment Amount Amount	(5)	(7)	(8)	(9)	(10)	(11)
50 N Laura Street #2500 1 Jacksonville, FL 32034 1/2/2020 Reliant Florida consulting, MO Add \$10,000. Consulting LLC, 50 N Laura Street #2500	(6) Sequence	(Last, Suffix, First, Middle) Street Address &	(add office sought if contribution to a		Amendment	Amount
Consulting LLC, 50 N Laura Street #2500		Consulting LLC, 50 N Laura Street #2500	campaign consultant	MO	Delete	\$10,000.00
	//	Consulting LLC, 50 N Laura Street #2500		МО	Add	\$10,000.00
	//					
	//					
	//					
	//					
	//					
DS-DE 14 (Rev. 11/13.)	//					