| CAMPAIGN TREASURER'S REPORT SUMMARY   |   |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| (1)   | Klynt A. Farmer   | OFFICE USE ONLY  |  |  |  |  |  |
|   | Name  | ONLINE SUBMISSION [1324066]                              |  |  |  |  |  |
| (2)   | 613259 River Road   | Submitted on:  |  |  |  |  |  |
|   | Address (number and street) Callahan, FL 32011            | 8/9/2024 13:45:42 (eastern)                              |  |  |  |  |  |
|   | City, State, Zip Code                                     |  |  |  |  |  |  |
|   | ☐ Check here if address has changed                       | (3) ID Number: 695                                       |  |  |  |  |  |
| (4)   | Check appropriate box(es):                                |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   | (5) Report  | Identifiers  |  |  |  |  |  |
|   | er Period: From 7 / 27 / 2024 To                          |  |  |  |  |  |  |
| 0   | riginal Amendment Spe                                     | ecial Election Report                                    |  |  |  |  |  |
| (6)   | Contributions This Report                                 | (7) Expenditures This Report                             |  |  |  |  |  |
| Casl  | n & Checks \$ , , 0 . 00                                  | Monetary   |  |  |  |  |  |
| Loar  | <del></del>   | Transfers to Office Account \$ , , 0 . 00                |  |  |  |  |  |
| Tota  | I Monetary \$ , , , 000                                   | Total Monetary \$ , , 0 . 00                             |  |  |  |  |  |
| In-Ki   | nd \$, <u>166</u> . <u>65</u>                             |  |  |  |  |  |  |
|   |   | (8) Other Distributions \$ , , 000_                      |  |  |  |  |  |
| (9)   | <b>TOTAL Monetary Contributions To Date</b> \$ ,52 ,97500 | (10) TOTAL Monetary Expenditures To Date \$ ,22 , _67832 |  |  |  |  |  |
| (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   Treasurer   Deputy Treasurer or electioneering comm.)  (Type name)    Candidate   Chairperson (only for PC and PTY) |   |  |  |  |  |  |  |
| X   |   | X  |  |  |  |  |  |
| Si  | gnature   | Signature  |  |  |  |  |  |

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name       | Klynt A. Farmer                         | (2) I.D. Number |                  |              |             |            |                 |
|----------------|---|-----------------|------------------|--------------|-------------|------------|-----------------|
|                |   |                 |                  | 8/2/2024     |             |            |                 |
| (3) Cover Peri | od//                                    | thro            |                  |              | (4) Page    | <b>a</b> 1 | of <sup>1</sup> |
| W              |   |                 | 1000             |              |             | -          |                 |
| (5)            | (7)                                     |                 | (8)              | (9)          | (10)        | (11)       | (12)            |
| Date           | Full Name                               |                 |                  |              |             |            |                 |
| (6)            | (Last, Suffix, First, Middle)           |                 |                  |              |             |            |                 |
| Sequence       | Street Address &                        | Co              | ontributor       | Contribution | In-kind     |            |                 |
| Number         | City, State, Zip Code                   |                 | Occupation       | Туре         | Description | Amendment  | Amount          |
| 8/1/2024       | Farmer , Klynt A                        |                 | county           | IK           | advertisin  | Add        | \$166.6         |
| 1 1            | 613259 River Road<br>Callahan, FL 32011 |                 | commissior<br>er | 1            | g           |            |                 |
|                | Carranan, 11 32011                      |                 |                  |              |             |            |                 |
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| Name Klynt                   | 7/27/2024 8/   | 2/2024   | 2) I.D. Numbei             | 2    | 695  |
|------------------------------|--|--|----------------------------|------|------|
| Cover Period _               | /through   |  | 4) Page <u>1</u>           | of   | 0    |
| (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)<br>Expenditure<br>Type | (10) | (11) |
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| DS-DE 14 (Rev. 11/13 )  SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES |  |  |  |  |  |  |