CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Steve Leary	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	PO Box 1449	[1327346]								
	Address (number and street)	Submitted on:								
	Winter Park, FL 32790	8/22/2024 13:01:04 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1211								
(4)	4) Check appropriate box(es):									
	 ☐ Candidate Office Sought: County Commissioner District 5 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ 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										
Cove	er Period: From <u>8</u> / <u>3</u> / <u>2024</u> To	8 / 15 / 2024 Report Type: <u>P7</u>								
☐ Original ☐ Special Election Report										
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, ,15656	Monetary								
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, ,15656	Total Monetary \$, , 0 . <u>00</u>								
In-Ki	ind \$,,									
		(8) Other Distributions \$, , 000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>157</u> , <u>011</u> . <u>81</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:										
	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	Steve Leary			(2) I.D. Number					
8/3/2024 8/15/2024 (3) Cover Period / / through / / (4) Page1 of _1									
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contr	8) ributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount		
8/15/2024 / /	Crossman , John ***Protected Voter***	I re es		СН	Description	Delete	\$156.5		
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1 1									

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Steve	URES				
(3) Cover Period	8/3/2024 /through_	8/15/2024 //	(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) Expenditure Type	(10)	(11) Amount
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