	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Eric L. McIntyre	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	PO Box 555601; �	Submitted on:								
	Address (number and street)	6/20/2020 00:59:47 (eastern)								
	Orlando, FL 32855									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:137								
(4)	Check appropriate box(es):									
	Candidate Office Sought: Sheriff									
	☐ 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								
		☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
	(5) Report	Identifiers								
Cove	er Period: From 6 $\frac{1}{2020}$ To	6 / 12 / 2020 Report Type: P1								
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
(-)		Monetary								
Casl	n & Checks \$, , 0 . 00	Expenditures \$, 10 , 694 . 22								
00.0.										
Loar	ns \$,, <u>0</u> .00	Transfers to								
		Office Account \$, , 0 . 00								
Tota	I Monetary \$, , 0 . 00									
		Total Monetary \$, _10 , 694 . 22								
In-Ki	ind \$,,, <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								
()	\$, 14, 852. 92	\$, 13 , 066 . 47								
		, <u> </u>								
		tification								
	•	on 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	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х	x x									
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Eric L. McIntyre				2) I.D. Numbe	er <u>1</u>	37
	6/1/2020 od////		6	/12/2020 ///	(4) Pag		
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		(8) ontributor Occupation	(9)	(10) In-kind Description	(11)	(12) Amount
/ /	Oity, State, Zip Code	Туре	Occupation	Туре	Description	Allerdirent	Amount
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	ric 1	L.	McInt	yre			engineering yet the	 (2) I.D. Nun	nber		137	r
		6	/1/20:	20		6/12/	2020	* *				
(3) Cover Pe	eriod		1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
6/12/2020	Supervisor of Elections, 119 West Kaley Street Orlando, FL 32806	qualifying fee	MO	Add	\$10,694.22
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