

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Mark Meta  
 Name

(2) 1112 Hoffner Ave.  
 Address (number and street)

Orlando, FL 32809  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1226550]

Submitted on:  
 8/14/2020 21:42:13 (eastern)

Check here if address has changed

(3) ID Number: 156

(4) Check appropriate box(es):

- Candidate Office Sought: Soil & Water Conservation Dist. Supervisor 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 8 / 1 / 2020 To 8 / 13 / 2020 Report Type: P7

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 10 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 10 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 10 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 10 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,      , 590 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      , 85 . 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 EXPENDITURES**

(1) Name Mark Meta

(2) I.D. Number 156

(3) Cover Period 8/1/2020 through 8/13/2020

(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					
8/12/2020 / /	Wells Fargo, 2610 S Orange Ave Orlando, FL 32806	monthly bank fee.	MO		\$10.00
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					