	CAMPAIGN TREASURE	R'S REPORT SUMMARY								
(1)	Bobby Agagnina  Name	OFFICE USE ONLY ONLINE SUBMISSION								
(2)	8203 Sun Springs Cr.; Unit 11	[1243001]								
(-)	Address (number and street)	Submitted on:								
	Orlando, FL 32825	2/1/2021 16:47:41 (eastern)								
-	City, State, Zip Code	<del></del>								
	Check here if address has changed	(3) ID Number: 193								
(4)	Check appropriate box(es):									
	<ul> <li>☐ Candidate Office Sought: Soil &amp; Water Conservation Dist. Supervisor Seat 1</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>									
	(5) Report	Identifiers								
Cove	er Period: From $10$ / $30$ / $2020$ To	2 / 1 / 2021 Report Type: TRG								
X Or	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	% Checks \$,,,000	Monetary Expenditures \$ , , , 0 . 00								
Loan	\$,, <u>0</u> .00	Transfers to Office Account \$ , , , 0 . 00								
	Monetary \$,,,000	Total Monetary \$ , , 0 . 00								
In-Kir	nd \$,, <u>0</u> . <u>00</u>									
		(8) Other Distributions \$ , , 00 _								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>2</u> , <u>544</u> . <u>87</u>								
(Ty	(11) Cert It is a first degree misdemeanor for any pers ertify that I have examined this report and it is true, corr rpe name)	ect, and complete:  (Type name)								
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		_X								
Sic	gnature	Signature								

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Bobby Agagnina	(2) I.D. Number							
	10/30/2020		2	/1/2021					
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	<b>e</b> 1	of <sup>0</sup>		
(3) Cover Period / / through / / (4) Page1 of _0									
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)	_		_					
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	N		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
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I I									
1 1									
, ,									
1 1									
1 1									
2 2									
I I									
f I									
2 6									
						2			
1 1									
1 1									

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Bobb	y Ag	agnin	ıa				 (2) I.D. Nun	nber	-	193	
	1	0/30/	2020		2/1/202	21					
(3) Cover Period		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
2/1/2021	CentralFlorida Softball League, P.O. Box 149692 Orlando, FL 32814	donation of remainingcampai gn funds	DI		\$925.49
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