CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Matthew Boggs	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1242814]							
(2) 2166 Christopher Lane	Submitted on:							
Address (number and street) St. Cloud, FL 34772	2/1/2021 10:48:50 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: <u>425</u>							
(4) Check appropriate box(es):								
<ul> <li>Candidate Office Sought: Soil and Water Conservation District Seat 4</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> </ul>								
(5) Report Identifiers								
Cover Period: From <u>6</u> / <u>27</u> / <u>2020</u> To	7 / <u>10</u> / <u>2020</u> Report Type: <u>P3</u>							
🗌 Original 🛛 Amendment 🗌 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , , 000	Monetary Expenditures \$ , , , 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,0 00							
Total Monetary       \$	Total Monetary \$ , , , , 00							
······································	(8) Other Distributions							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u></u> , <u>40</u> . <u>00</u>	\$,, <u>15</u> _ <u>00</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:								
(Type name)	(Type name)							
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)							
X	x							
Signature	Signature							

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Matthew Boggs</u>				(2) I.D. Number				
	6/27/2020	7/10/2020						
(3) Cover Perio	od/ /	thro	bugh	1 1	(4) Pag	e <sup>1</sup>	of <sup>0</sup>	
<b>、</b> <i>i</i>					_ () 0	N 9 <del>4</del>		
(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	Туре	Occupation	Туре	Description	Amendment	Amount	
				0.016	2			
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name Matthew Boggs (2) I.D. Number (2) I.D. Number					
(3) Cover Period	6/27/2020 I// through_	7/10/2020	(4) Page <u>1</u>	of_	1
(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) Amendment	(11) Amount
7/3/2020 1	Addition Financial, 1000 Primera Blvd Lake Mary, Fl 32746	bank fees	МО	Delete	\$5.00
2	Addition Financial, 1000 Primera Blvd Lake Mary, Fl 32746	bank fees	MO	Add	\$0.00
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