CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Brian Staver	OFFICE USE ONLY						
` '	Name	ONLINE SUBMISSION						
(2)	32896 Estate Garden Dr	Submitted on:						
	Address (number and street)	6/12/2019 10:20:17 (eastern)						
	Wesley Chapel, FL 33545							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:960						
(4)	Check appropriate box(es):							
	Candidate Office Sought: School Board	Member District 1						
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded						
	☐ Party Executive Committee (PTY)	☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	Identifiers						
Cove	er Period: From $12 / 1 / 2017$ To	12 / 31 / 2017 Report Type: M12						
□ 0		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
(0)	Contributions This Report							
Cast	n & Checks \$ , , 0 . 00	Monetary Expenditures \$ , , 30 . 00						
00.0.								
Loar	ns \$,,,000	Transfers to						
		Office Account \$ , , , 0 . 00						
Tota	I Monetary \$ , , 0 . <u>00</u>							
		Total Monetary \$ , , <u>30</u> . <u>00</u>						
In-Ki	nd \$,, <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						
	\$, <u>6</u> , 610. 16	\$, <u>6</u> , <u>778</u> . <u>01</u>						
	(11) Cert It is a first degree misdemeanor for any pers							
1		• • • • • • • • • • • • • • • • • • • •						
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		×						
	gnature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Brian Staver			(2) I.D. Number 960				
	12/1/2017	11.0000	1	2/31/2017			- 0	
(3) Cover Peri	iod / /	thro	ough	<i>l l</i>	(4) Pag	le <u> </u>	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Co	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
1 1								
I I								
1 1								
1 1								
j j								
/ /								
1 1								
1 1								

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Brian	Staver					 (2) I.D. Nun	nber	9	960	
		12/1/2	2017		12/31/	2017					
(3) Cover Po	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)	
(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	
12/5/2017	Supervisor of Elections, PO Box 300 Dade City, FL 33526	check 805 for petition verification	МО	Add	\$30.00	
1					-	
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