CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Democratic Executive Committee Name	OFFICE USE ONLY ONLINE SUBMISSION [1238470]							
(2) Address (number and street)	Submitted on: 11/9/2020 15:16:07 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number:1118							
(4) Check appropriate box(es):								
<ul> <li>Candidate Office Sought:</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 PC or ECO has disbanded</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								
Cover Period: From 8 / $14$ / $2020$ To								
Original   Image: Amendment   Image: Special Election Report								
(6) Contributions This Report	(7) Expenditures This Report Monetary							
Cash & Checks \$,, <u>39</u> .00	Expenditures \$ , , , 00							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$ , , 0 . 00							
Total Monetary \$,, <u>39</u> .00	Total Monetary \$ , , 0 . 00							
In-Kind \$,, <u>0</u> .00								
	(8) Other Distributions \$,, 00							
(9) TOTAL Monetary Contributions To Date \$, <u>76</u> , <u>742</u> . <u>31</u>	(10) TOTAL Monetary Expenditures To Date \$,72_,07870_							
(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, corr	rect, 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	Democratic Executive Committee				(2) I.D. Number			
				10/29/2020				
(3) Cover Peri	od / /	thro	ough	11	(4) Pag	je	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence	Street Address &	Co	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
10/1/2020 / /	Wilson, Sally 4044 Parkway Blvd Land O Lakes, FL 34639	I		CH		Add	\$29.0	
1								
10/20/2020 / /	Chase, Lula 14129 Paradise Ln Dade City, FL 33525	I		СН		Add	\$10.0	
2								
1 1	_							
1 1	_							
1 1	_							
1 1								
1 1	_							
1 1								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES         (1) Name       Democratic Executive Committee       (2) I.D. Number       1118						
(3) Cover Period	8/14/2020 //through_	10/29/2020 //	(4) Page <u>1</u>	of	0	
(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	
_/ /						
_/_/						
_/ /						
11						
_/ /						
_/ /						
11						
11						

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES