	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Bronson Oudshoff	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	1300 Stratford Dr.	Submitted on:							
	Address (number and street)	7/15/2024 12:55:11 (eastern)							
	City State Zip Code								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:1133							
(4)	Check appropriate box(es):								
		Member - District 5 - Single Member							
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ Check here if PC or ECO has disbanded							
		☐ 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	dentifiers							
Cove	er Period: From 4 / 1 / 2024 To								
		ecial Election Report							
	Contributions This Report	(7) Expenditures This Report							
(0)	Contributions This Report								
Casi	h & Checks \$ , , 0 . 00	Monetary Expenditures \$ , , 12 . 00							
Ouc.	,,,	· _ · _ · _ · _ ·							
Loar	ns \$,,, _000	Transfers to							
		Office Account \$ , , 0 . 00							
Tota	al Monetary \$ , , ,000								
		Total Monetary \$ , , _12 . 00							
In-Ki	ind \$,,,000								
	1	(8) Other Distributions							
	· ·	\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
(=,	\$,, <u>100</u> 00	\$ , , _10000_							
	,, ,,	,,							
	(11) Cert								
	It is a first degree misdemeanor for any person	on to falsify a public record (ss. 839.13, F.S.)							
Ιd	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		X							
	ignature	Signature							

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

(1) Name	Bronson Oudshoff	(2) I.D. Number							
	4/1/2024		7	/15/2024					
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e <u>1</u>	of		
					1	2			
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6)	(Last, Suffix, First, Middle)								
Sequence	Street Address &	Co	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
1									
1 1									
9 6									
1 1									
9						3			
1 1									
1									
J I									
1									
3		7							
I = I									
1 1									

DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name _	Bronson	Oudsh	off		100000000000000000000000000000000000000		 (2) I.D. Num	nber	1	.133	20
	4	/1/202	24		7/15/20	24		-			
(3) Cover P	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
4/1/2024	PNC, 50 Rosery Rd Largo, FL 33771	bank fee	МО		\$12.00
1					
4/26/2024	Oudshoff, Bronson ***Protected Voter***	loan repayment	DI		\$16.83
2					
//					
_//					
				3	
//					
//					
11					
10					
//					
DS-DE 14 (Rev.					