CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Neil Combee	OFFICE USE ONLY					
, ,	Name						
(2)	16000 Rockridge Rd						
	Address (number and street)						
	Polk City, FL 33868 City, State, Zip Code	<u> </u>					
	_	(2) ID Number					
<i>(</i>	Check here if address has changed	(3) ID Number: 255					
(4)	Check appropriate box(es):						
	☐ Candidate Office Sought: Property Appr ☐ Political Committee (PC)	raiser					
	☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded					
	Party Executive Committee (PTY)	Check here if PTY has disbanded					
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed					
	marriada making disolishesinig sommanisations)						
	(5) Repor	t Identifiers					
Cove	er Period: From $\underline{4}$ / $\underline{1}$ / $\underline{2023}$ To	4 / 30 / 2023 Report Type: M4					
<u>X</u> 0	riginal Amendment Sp	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cash	n & Checks \$,2, _50000	Monetary					
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00					
Tota	Monetary \$,2, 500 . 00	Total Monetary \$, , 0 . 00					
In-Ki	nd \$, , <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>1</u> , <u>245</u> . <u>30</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:							
/ T\	(Type name) (Type name)						
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)					
X		X					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Nei	l Combee				(2	2) I.D. Number		255	
	4/1/202	3		4/30/	2023				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of ¹	

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type Occupation		(9)	(10) In-kind Description	(11)	(12) Amount
Sequence Number	Street Address & City, State, Zip Code			Contribution Type			
1	BUILDING ON YOUR DREAMS, 133 HARBOR DRIVE SOUTH VENICE, FL 34285	F	political committee	СН			\$1,000.0
4/11/2023	O'NEILL, JR, GEORGE D PO BOX 1108 LAKE WALES, FL 33859	: I	artist/phi lanthropis t	. CH			\$1,000.0
4/17/2023	COOK, BERNARD M 6602 BROKEN ARROW TRL S LAKELAND, FL 33813	I	accountant	CH			\$500.0
J I							
1 1							
1 1							
1 1							
1 1							

C 1) Name <u>Neil</u> (AMPAIGN TREASURER'S R	(2	EXPENDIT 2) I.D. Numbei			
	4/1/2023 / through	30/2023	1) Page <u>1</u>		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)	(11)	
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