	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Cliff Barnes	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	2110 Oak Dr	Submitted on:								
	Address (number and street) Hutchinson Island, FL 34949	1/10/2024 11:21:18 (eastern)								
	City, State, Zip Code	<del></del>								
	☐ Check here if address has changed	(3) ID Number: 631								
(4)	Check appropriate box(es):	(-)								
	Candidate Office Sought: County Commissioner, District 5  Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)  Check here if PC or ECO has disbanded Check here if PTY has disbanded Check here if no other IE or EC reports will be filed									
	(5) Report	Identifiers								
Cove	er Period: From 10 / 1 / 2023 To	12 / 31 / 2023 Report Type: Q4								
X O	riginal Amendment Spo	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$ ,1 , <u>450</u> . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$ , , , 0 . 00								
Tota	I Monetary \$ , 1 , 450 . 00	Total Monetary \$ , 39 . 50								
In-Ki	ind \$ , , 0.00	Total Monetary \$ , , 39 . 50								
		(8) Other Distributions \$ , , 000								
(9)	(9) TOTAL Monetary Contributions To Date \$,1,1,45000									
(T	(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)  Individual (only for IE									
X		X Signature								
51	gnature	Signature								

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

(1) Name	ff Barnes	3			(2)	I.D. Number		631	
	10/1/20	23		12/31	L/2023				
(3) Cover Period	1	1	through	1	1	(4) Page	1	of $^{1}$	_

(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	0	(8) ontributor	(9)	(10) In-kind	(11)	(12)
Number	City, State, Zip Code	Туре	54 (55 (55 (55 (55 (55 (55 (55 (55 (55 (	Туре	Description	Amendment	Amount
11/27/2023	Coward, Doug 21 Winghaven Lane Ft. Pierce, FL 34949		self director	СН	2000,		\$250.0
11/27/2023	Hensley, Kathryn 117 NE Surfside Ave. Port Saint Lucie, FL 34983	I	retired	СН			\$200.0
11/29/2023	Barnes, Cliff 2110 Oak Drive Ft. PIerce, FL 34949	S	lawyer	СН			\$1,000.0
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<i>J</i> 1							
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name <u>C</u>	liff	Barnes					(2) I.D. N	lumber_		531	
		10/1/2	023		12/31/	2023	~ *	-			
(3) Cover Pe	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
11/29/2023	Marine Bank, 600 N. US 1 Ft. Pierce, FL 34950	check purchase	MO		\$39.50
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DS-DE 14 (Rev.	11/13 \				