

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Casey L. Woolsey  
 Name  
 (2) 203 Fort Wade Road; Ste. 105  
 Address (number and street)  
Ponte Vedra, FL 32081  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1243576]  
 Submitted on:  
 2/10/2021 09:53:24 (eastern)

Check here if address has changed

(3) ID Number: 1148

(4) Check appropriate box(es):

- Candidate Office Sought: County Judge - Group 2
- Political Committee (PC)
- 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

### (5) Report Identifiers

Cover Period: From 1 / 1 / 2021 To 1 / 31 / 2021 Report Type: M1

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 500 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 500 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 29 . 50

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 29 . 50

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 161 , 060 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 1 , 200 . 91

### (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 or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Casey L. Woolsey (2) I.D. Number 1148

1/1/2021 through 1/31/2021

(3) Cover Period      /      /      through      /      /      (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type    Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
1/27/2021 / /	Carlucci, Matthew 3707 Hendricks Avenue Jacksonville, FL 32207	I	state farm agent	CH			\$1,000.00
1							
1/31/2021 / /	Carlucci, Matthew 3707 Hendricks Avenue Jacksonville, FL 32207	I	state farm agent	RE			\$-500.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
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/ /							
/ /							

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

(1) Name Casey L. Woolsey

(2) I.D. Number 1148

(3) Cover Period 1/1/2021 through 1/31/2021

(4) Page 1 of 1

(5) Date	(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
(6) Sequence Number					
1/31/2021 / /	Stripe, 510 Townsend Street San Francisco, CA 94103	bank service charges	MO		\$29.50
1					
/ /					
/ /					
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