CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Casey L. Woolsey	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	203 Fort Wade Road; Ste. 105	Submitted on:							
	Address (number and street)	4/9/2021 14:30:08 (eastern)							
	Ponte Vedra, FL 32081 City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 1148							
(4)	_	(o) 15 Number.							
(+)	Check appropriate box(es): Candidate Office Sought: County Judge - Group 2 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 $3 / 1 / 2021$ To	3 / 31 / 2021 Report Type: <u>M3</u>							
X O	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , ,000	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota In-Ki	I Monetary \$,,,00 ind \$, , 0 . 00	Total Monetary \$, , , 36 . 00							
	, / /	(8) Other Distributions \$, , 000_							
(9)	(9) TOTAL Monetary Contributions To Date \$, 161_, 36000								
(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									
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Casey L. Woolsey	(2) I.D. Number							
	3/1/2021		3	/31/2021					
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e <u>1</u>	of 0		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Case	ey L.	Wool	sey				 (2) I.D. Nun	nber	1	1148	
	3,	/1/202	21		3/31/2	021		-			
(3) Cover Period	d	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
3/1/2021	SJC Supervisor of Elections,	data request form	MO		\$36.00
1	4455 Avenue A, Suite 101 St. Augustine, FL 32095				
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DS-DE 14 (Rev.	44/42 \				