	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Samuel George (Sam) St. John	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	14989 104th St.	Submitted on:							
	Address (number and street) Live Oak, FL 32060	8/2/2020 19:53:12 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 225							
(4)	Check appropriate box(es):								
	 ☐ Candidate Office Sought: Sheriff ☐ 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 7 / <u>11</u> / <u>2020</u> To								
X O	riginal Amendment Spo	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , <u>500</u> . <u>00</u>	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , <u>500</u> . <u>00</u>	Total Monetary \$. 0 . 00							
In-Ki	and \$,,0.00	Total Monetary \$, , , 0 . 00							
		(8) Other Distributions \$, , 000							
(9)	TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$,12 , _43474							
(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 or electioneering comm.) Deputy Treasurer Candidate Chairperson (only for PC and PTY)								
X		X							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

) Name	Samuel George (Sam)	(;	(2) I.D. Number					
	7/11/2020		7	//17/2020				
3) Cover Peri	od//	thre	ough	<i>l l</i>	(4) Page	a 1	of	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8)		(9)	(10) In-kind	(11)	(12)	
Number	City, State, Zip Code	Туре	267-27-1129-1-10342-10-62-00-62//	Туре	Description	Amendment	Amoun	
14/2020	William Agricultural, PO Box 836 Welborn, Fl 32094	1 2 2	owner	СН			\$50	
	weidoin, Fi 32094							
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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 Sa	muel	George	(Sam)	St.	John		 (2) I.D. Nun	nber	2	225	300
		7/11/20	20			7/17/2020		-			
(3) Cover Per	iod		1	thro	ugh	1 1	 (4) Page	1	of	0	

(5) Date	(7) Full Name	(8)	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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