	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1) (2)	Name Address Protected	OFFICE USE ONLY ONLINE SUBMISSION [1306168]						
(-)	Address (number and street)	Submitted on: 4/10/2024 11:30:39 (eastern)						
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:241						
(4)	Check appropriate box(es): Candidate Office Sought: County Judge Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications)	didate Office Sought: County Judge ical Committee (PC) tioneering Communications Org. (ECO) Check here if PC or ECO has disbanded y Executive Committee (PTY) Check here if PTY has disbanded pendent Expenditure (IE) (also covers an Check here if no other IE or EC reports will be filed						
	(5) Report	Identifiers						
	er Period: From 1 / 1 / 2024 To							
× O	Original Amendment Spe	ecial Election Report T						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , 0 . 00		Monetary						
Loar		Transfers to Office Account \$, , , 0 . 00						
Tota In-Ki	Il Monetary \$,,,00 ind \$, , 17 . 60	Total Monetary \$, , , 0 . 00						
		(8) Other Distributions \$, , 000_						
(9)	TOTAL Monetary Contributions To Date \$, , 0 00	(10) TOTAL Monetary Expenditures To Date \$, , 0 00						
<u>(T</u>	(11) Cert It is a first degree misdemeanor for any person certify that I have examined this report and it is true, corre Type name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	on to falsify a public record (ss. 839.13, F.S.)						
<u>X</u>		X						
Si	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	er <u>241</u>					
	1/1/2024 od////		3/31/2024	(4) Pag	je <u>1</u>	of
(5) Date (6) Sequence Number	(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)	(12) Amount
3/21/2024	Blue, William W ***Protected Voter***	S judge	IK	payment to the supervisor of elections for		\$17.6
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) Name Bill B) Cover Period	1/1/2024 3/ /through	31/2024	2) I.D. Numbei 1) Page1	7	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) Amoun
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