CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Gary Conroy	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1238193]						
(2) <u>3107 Queen Palm Drive</u>	Submitted on:						
Address (number and street)	11/5/2020 12:05:40 (eastern)						
Edgewater, FL 32141 City, State, Zip Code							
	(2) ID Number						
Check here if address has changed	(3) ID Number: <u>642</u>						
(4) Check appropriate box(es):							
Candidate Office Sought: <u>County Counc</u> Political Committee (PC)	11 Member, District 3						
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 <u>6</u> / <u>1</u> / <u>2020</u> To	6 / <u>12</u> / <u>2020</u> Report Type: <u>P1</u>						
□ Original Amendment □ Special Election Report							
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$, , 00	Expenditures \$,, <u>112</u> .00						
¢ 0.00							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$						
Total Monetary \$, , 0.00	Office Account \$,,,, 0 . 00						
	Total Monetary \$,, 112 . 00						
In-Kind \$,,0.00	, <u>112</u> . <u>00</u>						
, <u>, , , , , , , , , , , , , , , , , , </u>	(8) Other Distributions						
	\$,, 000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, 24 , 452 . 76	\$, 21 , 376 . 27						
(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, co	rrect, and complete:						
(Type name)	(Type name)						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	_X						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Gary Conroy</u>				(2) I.D. Number642					
	6/1/2020			/12/2020		_			
(3) Cover Perio	od / /	thro	bugh	<i>ll</i>	(4) Pag	e	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	Co	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
1 1									
/ /									
1 1									
1 1	-								
1 1	-								
1 1									
1 1	_								
/ /	_								

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name <u>Gary Conroy</u> (2) I.D. Number						
(3) Cover Period	6/1/2020 d//through	6/12/2020 //	4) Page <u>1</u>	of	1	
(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) Amendment	(11) Amount	
6/11/2020 1	Barry, Charles 700 Navigators Way Edgewater, FL 32141	contribution check was returned as nsf.	МО	Add	\$100.00	
6/11/2020 / / 2	Wells Fargo Bank , 1813 S Ridgewood Ave Edgewater, FL 32141	bank fee for bounced contribution check	МО	Add	\$12.00	
_/ /						
_/ /						
_/ /						
_/ /						
11						

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