CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Wendy Anderson	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	505 East Victoria Trails Blvd.	Submitted on:							
	Address (number and street)	8/14/2020 11:01:44 (eastern)							
	DeLand, FL 32724								
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number:689							
(4)	Check appropriate box(es):								
		Conservation District, Seat 4							
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded							
	Party Executive Committee (PTY)	☐ Check here if PTY has disbanded							
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	Identifiers							
Cove		8 / 13 / 2020 Report Type: P7							
ĭ o		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(0)	Contributions This Neport								
Cash	h & Checks \$ , , 0 . 00	Monetary Expenditures \$ , , 215 . 00							
Ouoi	,,,,								
Loar	ns \$,,,000	Transfers to							
		Office Account \$ , , 0 . 00							
Tota	I Monetary \$,,								
		Total Monetary \$ , , 215 . 00							
In-Ki	ind \$,,,000								
		(8) Other Distributions							
		\$,, <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,, 980 . 00	\$ , , 302. 24							
	(11) Cert It is a first degree misdemeanor for any pers	tification							
		, , , ,							
I certify that I have examined this report and it is true, correct, and complete:									
_(T	ype name)	_(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		×							
	gnature	Signature							

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Wendy Anderson		s l	z) I.D. Numbe	6	89
	8/1/2020	8	3/13/2020			
(3) Cover Perio	od / /	through	11	(4) Pag	e	of 0
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					N 100-10 N
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation	Туре	Description	Amendment	Amount
Trainio	ony, entre, z.p. este	1 Jpo Goodpadon	1,700	Description		2 Miloune
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Wen	ıdy	Anderso	n				 (2) I.D. Nur	nber	(	589	300
		8/1/20	20		8/13/20	020		-			
(3) Cover Perio	bc	I	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
8/9/2020	Furman, Hayley 421 North Woodland Boulevard	media services	МО		\$215.00
1	Deland, Fl 32724				
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DS-DE 14 (Rev.	11/13 \		9	-	