	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Barbara Deering	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION [1239918]								
(2)	606 Cypress Oak Circle	Submitted on:								
	Address (number and street)	Submitted on: 11/20/2020 18:17:04 (eastern)								
	DeLand, FL 32720									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:714								
(4)	Check appropriate box(es):									
		Conservation District, Seat 4								
	Political Committee (PC)	Charlebone # DC av ECO has disbonded								
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐	☐ Check here if PC or ECO has disbanded ☐ 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	dentifiers								
Cove		2 / 1 / 2021 Report Type: TRG								
		ecial Election Report								
		·								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	h & Checks \$, , 0 . 00	Monetary								
Loar	s \$,, <u>0</u> .00	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$,,	Total Monetary \$, , 0 . 00								
In-Ki	ind \$, , 0.00	, , , , , , , , , , , , , , , , , , , ,								
		(8) Other Distributions								
		\$,,000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$,1_, <u>350</u> 00_	\$, <u>1</u> , <u>350</u> . <u>00</u>								
(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:										
(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
X		×								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Barbara Deering				2) I.D. Numbe	er	14
	1/1/2020	thro	2 Nugh	/1/2021	(4) Don	. 1	of ⁰
(3) Cover Perio	od / /		Jugn	<i>' '</i>	(4) Pag	e	or
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence Number	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	Barbara	Deeri	ng				 (2) I.D. Nun	nber	7	714	
	1	/1/202	20		2/1/202	1		-			
(3) Cover P	eriod	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
11/20/2020	Deering, Barbara Candidate to Themselves 606 Cypress Oak Circle Deland, FL 32720	return of unused campaign monies	DI		\$360.50
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