CAMPAIGN TREASUR	RER'S REPORT SUMMARY
(1) Donna Brosemer	OFFICE USE ONLY ONLINE SUBMISSION
Name (2) 176 Birch Tree Place	[1334782]
(2) 176 Birch Tree Place Address (number and street)	Submitted on:
Daytona Beach, FL 32117	10/24/2024 10:26:18 (eastern)
City, State, Zip Code	
Check here if address has changed	(3) ID Number: 961
(4) Check appropriate box(es):	
☐ Candidate Office Sought: School Board	d Member, District 4
 ☐ 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) Repo	ort Identifiers
Cover Period: From 10 / 5 / 2024 T	To 10 / 18 / 2024 Report Type: G5
✓ Original	Special Election Report
(6) Contributions This Report	(7) Expenditures This Report
(-)	Monetary
Cash & Checks \$,, <u>257</u> . <u>94</u>	Expenditures \$, , <u>107</u> . <u>94</u>
Loans \$,,,000	Transfers to Office Account \$, , 0 . 00
Total Monetary \$, , <u>257</u> . <u>94</u>	Total Monetary \$, , 107 . 94
In-Kind \$,,	,, ,, ,
	(8) Other Distributions
	\$,, <u>0</u> . <u>00</u>
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$, <u>31</u> , <u>660</u> . <u>26</u>	\$, <u>30</u> , <u>238</u> . <u>19</u>
	ertification erson to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, co	orrect, and complete:
(Type name)	(Type name)
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)
X	×
Signature	Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Donna Brosemer				2) I.D. Numbe	er <u> </u>	061
	10/5/2024			0/18/2024			
(3) Cover Perio	od//	thro			(4) Pag	e ¹	of ¹
	· · · · · · · · · · · · · · · · · · ·		(170)	V	,, _	52 W 	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name		(=)	(8)	()	()	(- J
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	C	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
	WIGLEY, ALICE		retired	CH	Section (Control of Control of Co		\$257.9
10/6/2024	37 FOREST VIEW WAY						
Ι	ORMOND BEACH, FL 32174						
1							
J I							
1 1							
I = I							
1 1							
<i>D E</i>							
ř 2							
1 1	-						
1 1							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	onna	Broseme	er			100	(2) I.D. Nui	nber	9	961	
		10/5/2	024		10/18/	2024					
(3) Cover Pe	eriod	1	1	through	/	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
10/15/2024	BROSEMER, DONNA 176 Birch Tree Place Daytona Beach, FL 32117	petty cash	PW		\$100.00
10/18/2024	PAYPAL, 2211 NORTH FIRST ST SAN JOSE, CA 95131	fee	МО		\$7.94
//					
//					
//					
//					
//					
//					