CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Democratic Executive Committee	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION [1179030]						
(2)		Submitted on:						
	Address (number and street)	11/2/2018 16:50:57 (eastern)						
	Crawfordville, FL 32327 City, State, Zip Code							
		(3) ID Number: 13						
(4)	Check here if address has changed	(3) ID Number:13						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: ☐ Political Committee (PC)							
	☐ 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						
Cove	er Period: From <u>8</u> / <u>24</u> / <u>2018</u> To	11 / 1 / 2018 Report Type: <u>G-7</u>						
<u>X</u> 0	riginal Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash	n & Checks \$,1 , 250 . 00	Monetary Expenditures \$, , <u>500</u> . <u>00</u>						
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Total Monetary \$		Total Monetary \$, , <u>500</u> . <u>00</u>						
In-Ki	nd \$,, 0 . 00							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>22</u> , <u>540</u> . <u>82</u>	\$, <u>20</u> , <u>643</u> . <u>58</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\	(Type name) (Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		χ						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Democratic Executi	ve Co	mmittee	(2) I.D. Number				
	8/24/2018		1	1/1/2018				
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e1	of ¹	
1000. 98			1000		F			
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
9/14/2018	Small County	P		CH			\$1,250.0	
1 1	Coalition, 214 South Bronough Street							
	Tallahassee, FL 32301							
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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	Democratio	Execut	tive Commit	tee		(2)	I.D. Num	iber	1	.3	
	8/24	/2018		11/1/20	18						
(3) Cover Pe	riod /	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
9/4/2018	Gavin Campaign, Jamel R 525 Old Bethel Rd Crawfordville, FL 32327	county commission campaign	МО		\$500.00
1				5	
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