CAMPAIGN T	REASURER'S REPORT SUMMARY							
(1) Mike Barker Name	OFFICE USE ONLY ONLINE SUBMISSION							
(2) 123 Beaver Dam Road	Submitted on:							
Address (number and street)  DeFuniak Springs, FL 32433	7/29/2020 19:06:37 (eastern)							
City, State, Zip Code								
☐ Check here if address has chang	ged (3) ID Number: 501							
(4) Check appropriate box(es):								
<ul> <li>☐ Candidate Office Sought: County Commissioner, District 3</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Check here if PC or ECO has disbanded</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>								
	(5) Report Identifiers	Description of the second seco						
Cover Period: From 7 / 18 /	2020 To 7 / 24_ / 2020 Report Type: P5	)						
✓ Original — Amendment	Special Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ ,1 , _27	Monetary Expenditures \$ , , <u>321</u> . <u>00</u>	)						
Loans \$ , ,	Office Account \$ , , ,	)						
Total Monetary \$,1 ,1	Total Monetary \$ , , <u>321</u> . <u>00</u>	)						
In-Kind \$ , ,	(8) Other Distributions \$ , , 000							
(9) TOTAL Monetary Contributions T \$ ,12 ,0750		te						
I certify that I have examined this report ar	(11) Certification or for any person to falsify a public record (ss. 839.13, F.S.)  and it is true, correct, and complete:  (Type name)    Candidate	(YTY)						
X Signature	X Signature							
Sidifature	ı əlunatüre							

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

(1) Name	like Barke	r			(2) I.D. Number 501							
	7/18/	2020			7/24/	2020						
(3) Cover Period	d /	9	i i	through	1	1	(4) Page	1	of	1		

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/20/2020	Lucus, Susan 249 N Blue Heron Dr Santa Rosa Beach, Fl 32459	Î		СН			\$75.0
7/21/2020	Cigar Factory Social Club LLC , 12272 Emerald Coast Parkway Miramar Beach, Fl 32550		business owner	СН			\$1,000.0
7/22/2020	Hall, Kathleen 3406 Ravenwood In Miramar Beach, Fl 32550	I		СН			\$100.0
7/22/2020	Reis, Peggy 5224 Tivoli Drive Miramar Beach, Fl 32550	I		СН			\$100.0
I I							
J I							
J I							
1 1							

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

(1) Name _M	like	Barker							 (2) I.D. Nur	nber	Ţ	501	
		7/18/	20	20		7/	24/2	020		-			
(3) Cover Pe	eriod	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
7/20/2020	Smith Signs and Printing,	signs	MO		\$321.00
1	24 S. 8th Street DeFuniak Springs, Fl 32435				
				16	
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DS-DE 14 (Rev.					