	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	David Buchanan	OFFICE USE ONLY
	Name	ONLINE SUBMISSION
(2)	300 East Shipwreck Road	Submitted on:
	Address (number and street)	5/10/2022 22:19:57 (eastern)
	Santa Rosa Beach, FL 32459	` `
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number:549
(4)	Check appropriate box(es):	
	☐ Candidate Office Sought: County Commis	sioner, District 4
	Political Committee (PC)	
	☐ Electioneering Communications Org. (ECO)☐ Party Executive Committee (PTY)	☐ 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
	individual making electioneering communications)	
0		t Identifiers
	er Period: From 4 / 1 / 2022 To	
<u>X</u> 0	riginal Amendment Spo	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
	_	Monetary
Cash	n & Checks \$, , 0 . <u>00</u>	Expenditures \$, , 406 . 60
1	s \$, , 0.00	To a factor
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$
Tata	I Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00
rota	I Monetary \$, , 000	Total Monetary \$. 406 . 60
I IZ:	and \$, , 0.00	Total Monetary \$, , 406 . 60
In-Ki	and \$,,,	(O) Other Distributions
		(8) Other Distributions \$ 0 . 00
		\$, ,, <u>0</u> . <u>00</u>
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$,,, <u>0</u> 00	\$, , <u>406</u> . <u>60</u>
		tification on to falsify a public record (ss. 839.13, F.S.)
	-	
Ιc	certify that I have examined this report and it is true, corr	ect, 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	David Buchanan				2) I.D. Numbe	r5	49
	4/1/2022		4	/30/2022			
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	<u> </u>	of
-						· ·	
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Contributor		Contribution	In-kind		
Number	City, State, Zip Code	Туре		Туре	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 David	d Bucha	nan	1				 (2) I.D. Nur	nber	!	549	
	4/1/2	202	2		4/30/2	022					
(3) Cover Period	1		1	through	1	1	(4) Page	1	of	1	

(5) Date	(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	
4/28/2022	Beach Repro, 1 2671 Emerald Coast Pkwy#211 miramar Beach, fl 32550	cards	MO		\$406.60	
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