CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1) William "Bill" Busch	OFFICE USE ONLY					
Name						
(2) 6761 NW 20TH ST., Margate, FL 33063	MAY 2 8 2020					
Address (number and street) Margate, FL 33063						
City, State, Zip Code	PLAN SERIO					
☐ Check here if address has changed	(3) ID Number:					
(4) Check appropriate box(es):						
 ✓ Candidate Office Sought: ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 						
(5) Report	Identifiers					
Cover Period: From $04 / 01 2020$ To	04 / 30 /2020 Report Type: 2020-M4					
☐ Original ☑ Amendment ☐ Spe	ecial Election Report					
(6) Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$, , ,	Monetary Expenditures \$,,,00					
Loans \$, , _0	Transfers to Office Account \$, , 0.					
Total Monetary \$,,	Total Monetary \$, 20 . 00					
In-Kind \$, ,						
	(8) Other Distributions \$, , 0 . 00					
(9) TOTAL Monetary Contributions To Date \$, 1 , _10009	(10) TOTAL Monetary Expenditures To Date \$,,13030					
(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:						
Milliam Duadh						
(Type name) VVIIIIaIII DUSCN ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.)	☐ Chairperson (only for PC and PTY)					
X 20 Cha Busel	x Shands					
Signature	Signature					

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS ARGA

(1) Name William "Bill" Busch (2) I.D. Number MAY 2 8 2020							
(3) Cover Period	04 / 01 / 2020	through/	30 2020	_	1 1		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11) (12)		
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment Amount		
			-				
1 1							
1 1							
1 1							
1 1							
, ,							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES



CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES 2 8 2020

	JIII BUSCII		2) I.D. Numbe	5 19/41 6	. 0 2020	
(3) Cover Perio	od/	<u>/ 30 / 2020</u>	(4) Page of			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)/N		
1	City National Bank 9750 W Atlantic Blvd Coral Springs, FL 33071	Monthly Service Fee	CAN		\$20.00	
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