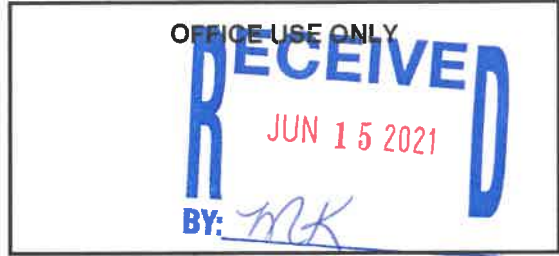


CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Troy McDonald
 Name
 (2) 308 SW Dyer Drive
 Address (number and street)
Stuart, FL 34994
 City, State, Zip Code



Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Stuart City Commission, Group 4
- 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

Cover Period: From 06 / 01 / 21 To 06 / 11 / 21 Report Type: P1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ 1,000.00

Loans \$, .

Total Monetary \$ 1,000.00

In-Kind \$, .

(7) Expenditures This Report

Monetary Expenditures \$, , 205.00

Transfers to Office Account \$, .

Total Monetary \$, , 205.00

(8) Other Distributions

\$, .

(9) TOTAL Monetary Contributions To Date

\$, 1,000.00

(10) TOTAL Monetary Expenditures To Date

\$, , 205.00

(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:

(Type name) Troy McDonald

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X
 Signature

(Type name) Troy McDonald

Candidate Chairperson (only for PC and PTY)

X
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name TROY MCDONALD (2) I.D. Number _____

(3) Cover Period 06 / 01 / 2021 through 06 / 11 / 2021 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
06 / 01 / 2021 1	CAROL REED 926 SE 5TH STREET STUART, FL 34994	I	CPA	CHE			\$1000.00
/ /							
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RECEIVED

JUN 15 2021

BY: mk

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES


(1) Name TROY MCDONALD

(2) I.D. Number _____

(3) Cover Period 06 / 01 / 2021 through 06 / 11 / 2021

(4) Page 1 of 1

(5) Date	(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) Amendment	(11) Amount
(6) Sequence Number					
06 / 07 / 21	CITY OF STUART 121 SW FLAGLER AVE STUART, FL 34994	FILING FEE	MOM		\$205.00
1					
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 JUN 15 2021
 BY: mk