CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Rita Pritchett	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	3456 Tackett Dr	Submitted on:								
	Address (number and street)	2/29/2016 16:10:22 (eastern)								
	Titusville, FL 32796									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:577								
(4)	Check appropriate box(es):									
	Candidate Office Sought: County Commis	sioner, District 1								
	☐ 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	Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
(5) Report Identifiers										
Cove	er Period: From 2 / 1 / 2015 To	2 / 28 / 2015 Report Type: M2								
□ 0		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
(-)	Communication of the point	Monetary								
Cast	n & Checks \$, , 000	Expenditures \$, , 100 . 00								
		<u> </u>								
Loar	ns \$,,,000	Transfers to								
		Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , <u>0</u> . <u>00</u>									
		Total Monetary \$, , 100 . 00								
In-Ki	nd \$, , <u>100</u> . <u>00</u>									
		(8) Other Distributions								
		\$, , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, <u>27</u> , <u>723</u> . <u>65</u>	\$, <u>3</u> , <u>209</u> . <u>04</u>								
		tification								
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	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	Rita Pritchett	(2) I.D. Number							
	2/1/2015			/28/2015					
(3) Cover Perio	od//	thro			(4) Pag	e	of $\frac{1}{}$		
1000 98			1900						
(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		Occupation	Туре	Description	Amendment	Amount		
2/2/2015	Pritchett, Rita	I	c.p.a.	IK		Add	\$100.0		
2/2/2015	3456 Tackett Dr. Titusville, FL 32796				account/				
	Titusville, FL 32790				supervisor of				
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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 _F	Rita	Pritchet	it				 (2) I.D. Nun	nber	5	577	
		2/1/20	15		2/28/20	015	-	-			
(3) Cover Po	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
2/2/2015	Brevard County, Supervisor of Elections	petitons	MO	Add	\$100.00
1	P.O. Box 1119 Titusville, FL 32781				
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DS-DE 14 (Rev.	11/13 }		y		