	CAMPAIGN TREASURE	ER'S REPORT SUMMARY						
(1)	Judith Tinder	OFFICE USE ONLY						
78	Name	ONLINE SUBMISSION						
(2)	504 Virginia Ave.	Submitted on:						
	Address (number and street)	8/2/2021 16:09:19 (eastern)						
	Lynn Haven, FL 32444							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:540						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: Lynn Haven Cor	mmissioner Seat 4						
	☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)	☐ Check here if PC or ECO has disbanded						
		☐ 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	I Identifiers						
Cove	* , *							
	er Period: From $\frac{2}{2}$ / $\frac{1}{2}$ / $\frac{2021}{2021}$ To							
		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cash	h & Checks \$, , 0 . 00	Expenditures \$, , 0 . 00						
	• 0 00	<u></u>						
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Tota	al Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00						
TOla	al Monetary \$,,	Total Monetary \$. 0 . 00						
In Ki	ind \$, , 47 . 44	Total Monetary \$, , 0 . 00						
In-Ki	ind Ψ,, <u></u> ,	(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$	\$						
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)								
Lo	-							
I certify that I have examined this report and it is true, correct, and complete:								
-	ype name)	(Type name)						
	Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		x						
	ignature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Judith Tinder		(2) I.D. Number ₅₄₀						
	2/1/2021		2/12/2021						
(3) Cover Perio	od////	thro	ough	11_	(4) Pag	je <u> </u>	of		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Co Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
2/11/2021	cook, vickie 504 virginia ave lynn haven, fl 32444	I		IK	envelopes	Add	\$47.4		
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f I									
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) NameJudith Tinder (2) I.D. Number 540									
	2/1/2021 2/1 	2/2021	4) Page <u>1</u>		0				
(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)	(11) Amount				
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