CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Tonya Barrow	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1298704]						
(2) <u>1103 Moss Street</u>	Submitted on:						
Address (number and street) Parker, FL 32404	7/13/2023 11:16:04 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 613						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>Parker Council Member Seat 2</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) 							
(5) Report Identifiers							
Cover Period: From <u>4</u> / <u>14</u> / <u>2023</u> To	7 / <u>17</u> / <u>2023</u> Report Type: <u>MTR</u>						
🖾 Original 🔄 Amendment 🔄 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 0 . 00	Monetary Expenditures \$, , , 0 . 00						
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$						
Total Monetary \$	Total Monetary \$, , , 0 . 00						
	(8) Other Distributions						
	\$,,000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>1</u> , <u>600</u> . <u>00</u>	\$, <u>1</u> , <u>600</u> . <u>00</u>						
(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) (Type name)							
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
x	x						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name				(2) I.D. Number ₆₁₃					
4/14/2023			7	7/17/2023					
(3) Cover Perio	od / /	thro	bugh	<i>ll</i>	(4) Page	e <u> </u>	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
1 1									
1 1									
/ /									
1 1									
1 1									
1 1									
1 1									
/ /									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Tony) EXPENDIT 2) I.D. Number				
(3) Cover Period	4/14/2023 IIthrough_	7/17/2023	4) Page <u>1</u>	of	1
(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)
(6) Sequence Number	Street Address & City, State, Zip Code	contribution to a candidate)	Expenditure Type	Amendment	Amount
	Barrow, Tonya 1103 Moss Street Parker, Fl 32404	repay loan to self	DI		\$770.74
//_					
_/ /					
//					
_/ /					
_/ /					
11					
_ / /					

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES