

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Amanda Seyfang  
 Name  
 (2) 22679 NW 51st Lane  
 Address (number and street)  
Lawtey, Fl 32058  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1207926]

Submitted on:  
 6/2/2020 08:30:24 (eastern)

Check here if address has changed

(3) ID Number: 242

(4) Check appropriate box(es):

- Candidate Office Sought: Supervisor of Elections
- 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 5 / 1 / 2020 To 5 / 31 / 2020 Report Type: M5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      , 10 , 050 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      , 10 , 050 . 00

In-Kind \$      ,      , 457 . 11

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 0 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 0 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 15 , 370 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      , 139 . 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) \_\_\_\_\_  
 Individual (only for IE or electioneering comm.)  Treasurer  Deputy Treasurer

X \_\_\_\_\_  
 Signature

(Type name) \_\_\_\_\_  
 Candidate  Chairperson (only for PC and PTY)

X \_\_\_\_\_  
 Signature

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Amanda Seyfang (2) I.D. Number 242  
 (3) Cover Period 5/1/2020 through 5/31/2020 (4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
5/1/2020 / /	Williams, Frank PO BOX 550 Keystone Heights, Fl 32656	I	retired	CH			\$250.00
1							
5/1/2020 / /	Holland, Winnie 1030 Meadows Dr. Starke, Fl 32091	I	retired	CH			\$100.00
2							
5/1/2020 / /	O'Brian, James PO BOX 501 Starke, Fl 32091	I	retired	CH			\$100.00
3							
5/4/2020 / /	Adams, Bill 4313 Seminole St Starke, Fl 32091	I		CH			\$50.00
4							
5/4/2020 / /	Seyfang, Amanda 22679 NW 51st Ln Lawtey, Fl 32091	S	ass't sup'v of elect	CH			\$9,000.00
5							
5/11/2020 / /	James, Dennis 4471 Twinview Ln Orlando, Fl 32814	I	retired	CH			\$100.00
6							
5/17/2020 / /	Dean, Laura PO BOX 1569 Keystone Heights, Fl 32656	I	pharmacist	CH			\$200.00
7							
5/20/2020 / /	Carter, Rhonda 11177 NW County Road 229 Starke, Fl 32091	I		CA			\$50.00
8							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Amanda Seyfang (2) I.D. Number 242  
 5/1/2020 through 5/31/2020  
 (3) Cover Period / / through / / (4) Page 2 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description	Amendment	Amount
5/21/2020 / /	Barksdale, Matthew 378 E Mimosa Dr Starke, Fl 32091	I		CA			\$50.00
9							
5/21/2020 / /	Barksdale, Brandyn 378 E Mimosa Dr Starke, Fl 32091	I		CA			\$50.00
10							
5/23/2020 / /	Barry, John 1208 Grace St Janesville, WI 53545	I	retired	CH			\$100.00
11							
5/28/2020 / /	Seyfang, Amanda 22679 NW 51st Lane Lawtey, Fl 32058	S	ass't sup'v of elect	IK	wood for signs		\$457.11
12							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Amanda Seyfang

(2) I.D. Number 242

(3) Cover Period 5/1/2020 through 5/31/2020

(4) Page 1 of 0

(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					
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