CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Rita Pritchett	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)		Submitted on:						
	Address (number and street)	7/15/2024 13:03:35 (eastern)						
	City, State, Zip Code	<del></del>						
	Check here if address has changed	(3) ID Number: 985						
(4)	Check appropriate box(es):							
. ,	☐ Candidate Office Sought: Tax Collector							
	Political Committee (PC)	_						
	<ul><li>☐ Electioneering Communications Org. (ECO)</li><li>☐ Party Executive Committee (PTY)</li></ul>	☐ 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	Identifiers						
Cove	er Period: From 6 / 29 / 2024 To	7 / 12 / 2024 Report Type: P3						
□ 0	riginal Amendment Sp	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Casl	n & Checks \$ ,1 , <u>000</u> . <u>00</u>	Expenditures \$ , , 39						
Loar	ns \$ , , 0.00	Transfers to						
Luai	,,,	Office Account \$ , , 0 . 00						
Tota	I Monetary \$ , 1,000.00							
		Total Monetary \$ , , _29 . 39						
In-Ki	nd \$ , , 0 . <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>15</u> , <u>069</u> . <u>58</u>						
•	(11) Cor	lification						
(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:								
(T	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		x						
	gnature	Signature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Rita Pritchett			2) I.D. Numb	er g	185
	6/29/2024		7/12/2024			
(3) Cover Peri	od//	through	11	(4) Pag	ge <sup>1</sup>	of <sup>1</sup>
10047 MB						
(5)	(7)	(8)	(9)	(10)	(11)	(12)
Date	Full Name					
(6)	(Last, Suffix, First, Middle)					
Sequence	Street Address &	Contributo		In-kind		
Number	City, State, Zip Code	Type Occup		Description	Amendment	Amount
7/12/2024	Genoni, Charles 4760 N. US1 #201	I develo			Add	\$1,000.0
,, 12, 2021	Melbourne, FL 32935	build	er			
1						
1						
1 1						
				-		
1 1						
	_					
.7 3						
1 1	_					
e 3						
1 1	_					
	_					
1 1						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _R	ita	Pritche	ett					 (2) I.D. Nun	nber	9	985	
		6/29/	20	24		7/12/2	2024		-			
(3) Cover Pe	eriod	1		1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
7/12/2024	Paypal, www.paypal.com Titusville, Fl 32796	paypal fee	MO	Add	\$29.39
1					
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, ,					
//					
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DS-DE 14 (Rev.					