	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Rita Pritchett	OFFICE USE ONLY						
• •	Name	ONLINE SUBMISSION [1304796]						
(2)		Submitted on:						
	Address (number and street)	4/4/2024 19:00:48 (eastern)						
	<u>'</u>							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 985						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: Tax Collector							
	Political Committee (PC)	Charle have if DC as ECO has dishanded						
		<ul><li>☐ Check here if PC or ECO has disbanded</li><li>☐ Check here if PTY has disbanded</li></ul>						
	☐ 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 1 / 1 / 2024 To							
		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
	<b>*</b>	Monetary						
Casl	h & Checks \$ , , 0 . <u>00</u>	Expenditures \$ , , 320 . 35						
Loar	ns \$,,, _000	Transfers to						
Luai	is , , , , , , , , , , , , , , , , , , ,	Office Account \$ , , , 0 . 00						
Tota	al Monetary \$ , , 0 . 00	,,,						
TULA	,,,,	Total Monetary \$ , , 320 . 35						
In-Ki	ind \$ , , <u>161</u> . <u>38</u>	,,,						
II i-tXi	ind	(8) Other Distributions						
		(8) Other Distributions \$ , 000_						
		Ψ , ,						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>20</u> , <u>600</u> . <u>00</u>	\$,, <u>320</u> . <u>35</u>						
	(11) Cert It is a first degree misdemeanor for any perso							
	-							
I certify that I have examined this report and it is true, correct, and complete:								
(T	ype name)	(Type name)						
	Individual (only for IE  Treasurer Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC and PTY)						
or electioneering comm.)								
X		X						
	ignature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Rita Pritchett	(2) I.D. Number 985							
	1/1/2024			/31/2024					
(3) Cover Perio	od//	thro			(4) Pag	e <sup>1</sup>	of <sup>1</sup>		
VI.20 80			1995						
(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	Туре		Туре	Description	Amendment	Amount		
3/3/2024	Pritchett, Rita	S	candidate	IK	stamps 1	Add	\$161.3		
1 1	Pritchett 3456 TACKETT DRIVE								
	RITA PRITCHETT								
1	Titusville, fl 32796								
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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 _R	Rita	Pritchet	tt				 (2) I.D. Nun	nber	9	985	
		1/1/20	24		3/31/2	024		-			
(3) Cover Pe	eriod	1	1	through	/	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
3/17/2024	USPS, www.usps.com	stamps	MO	Add	\$320.35
1	Titusville, Fl 32780				
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