CAMPAIGN TREASURER'S REPORT SUMMARY												
(1)	Becky Trickey-Smith	OFFICE USE ONLY										
•	Name	ONLINE SUBMISSION [1229870]										
(2)	12366 NW Smith Ln	Submitted on:										
	Address (number and street)	9/9/2020 12:16:05 (eastern)										
	Clarksville, FL 32430 City, State, Zip Code											
	☐ Check here if address has changed	(3) ID Number: 266										
(4)		(5) 15 Number										
(4)	Check appropriate box(es): X Candidate Office Sought: Tax Collector											
												
	☐ 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										
	marriada, making olookonooning communications;											
		Identifiers										
Cove	er Period: From $\underline{6}$ / $\underline{1}$ / $\underline{2020}$ To	9 / 9 / 2020 Report Type: <u>TR1</u>										
X O	riginal Amendment Spe	ecial Election Report										
(6)	Contributions This Report	(7) Expenditures This Report										
		Monetary										
Cash	n & Checks \$, , 000_	Expenditures \$, ,										
Loon	ns \$, , 0.00	Transfers to										
Loan	is , , , , , , , , , , , , , , , , , , ,	Office Account \$, , 0 . 00										
Total	I Monetary \$, , 0 . 00	· / /										
		Total Monetary \$, , 0 . 00										
In-Ki	nd \$, , 0.00											
		(8) Other Distributions										
		\$, ,, ,000										
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date										
` '	\$,, 90.00	\$, _ 90 . 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:												
	ype name)	(Type name)										
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)										
v		V										
X Sid	gnature	X Signature										

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Becky Trickey-Smith (2) I.D. Number 266								
		9	/9/2020	20				
(3) Cover Perio	od / /	thro	ugh	11_	(4) Pag	e ¹	of ⁰	
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &	Cç	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
	7000							
1 1								
100								
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		3						
1 1								
1								

1 1								
1 1	-							
1 1								
1 1								

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Becky	Trick	ey	-Smith					 (2) I.E). Num	ber		266	
		6/1/	202	20		9/9	/202	0						
(3) Cover P	eriod	1		1	through		1	1	(4) Pa	iae	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
9/9/2020	Smith, Becky 12366 NW Smith Ln Clarksville, FL 32430	close acct.	DI		\$90.00
1	02423672226772 02350			0	
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DS-DE 14 (Rev	44(40.1)				