CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Harold Elbert Pickron	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1260974]							
(2) 16798 SW 18th Street	Submitted on:							
Address (number and street) Blountstown, FL 32424	5/9/2022 15:03:18 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 291							
(4) Check appropriate box(es):								
<ul> <li>Candidate Office Sought: <u>County Commissioner</u>, District 5</li> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> <li>Party Executive Committee (PTY)</li> <li>Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>Check here if PTY has disbanded</li> <li>Check here if no other IE or EC reports will be filed</li> </ul>								
(5) Report Identifiers								
Cover Period: From $4$ / $1$ / $2022$ To	4/ 30/ 2022 Report Type: 2022-							
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
Cash & Checks \$ , , <u>520</u> . <u>00</u>	Monetary Expenditures \$ , , , 0 . 00							
Loans \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$,,,000							
Total Monetary       \$	Total Monetary \$ , , , 0 . 00							
	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,, 520 . 00	\$,, <u>0</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							

DS-DE 12 (Rev. 11/13)

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Harold Elbert Pickron</u> (2) I.D. No					2) I.D. Numbe	umber		
	4/1/2022 4			/30/2022		_		
(3) Cover Peri	iod / /	thro	ough	11	(4) Page	e	of	
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name		~ /		~ 7			
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &		ontributor	Contribution	In-kind			
Number	City, State, Zip Code Pickron, Harold		Occupation retired	Туре СН	Description	Amendment	Amount \$520.00	
4/13/2022	16798 SW 18th Street			CII			¢320.00	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Harol	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES 1) Name_Harold Elbert Pickron (2) I.D. Number291							
(3) Cover Period	4/1/2022 /_/through	4/30/2022	4) Page <u>1</u>	of	0			
(5) Date (6) Sequence Number	(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			
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES