

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) TOMI STINSON BROWN
 Name
 (2) 959 SE ROSSI DR
 Address (number and street)
LAKE CITY, FL 32025
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1195404]

Submitted on:
 12/4/2019 10:52:57 (eastern)

Check here if address has changed

(3) ID Number: 1223

(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 11 / 1 / 2019 To 11 / 30 / 2019 Report Type: M11

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 18 . 20

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 18 . 20

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 1 , 500 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 247 . 86

(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 TOMI STINSON BROWN (2) I.D. Number 1223

11/1/2019 through 11/30/2019

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name TOMI STINSON BROWN

(2) I.D. Number 1223

(3) Cover Period 11/1/2019 through 11/30/2019

(4) Page 1 of 1

(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					
11/1/2019 / /	Supervisor of Elections, 971 W. Duval Street Ste 102 Lake City, FL 32055	submitting 81 petitions	MO		\$8.10
1					
11/13/2019 / /	Supervisor of Elections, 971 W. Duval Street Ste 102 Lake City, FL 32055	submitting 101 petitions	MO		\$10.10
2					
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