

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Christie K. Johnson
 Name
 (2) 1360 SE 349 Hwy
 Address (number and street)
Old Town, FL 32680
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1234051]

Submitted on:
 10/9/2020 15:00:33 (eastern)

Check here if address has changed (3) ID Number: 186

(4) Check appropriate box(es):

Candidate Office Sought: Clerk of the Circuit Court & Comptroller

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 9 / 19 / 2020 To 10 / 2 / 2020 Report Type: G4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 160 . 00

Loans \$, , 0 . 00

Total Monetary \$, 1 , 160 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 1 , 220 . 51

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 1 , 220 . 51

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 10 , 070 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 9 , 885 . 27

(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 Christie K. Johnson (2) I.D. Number 186

9/19/2020 through 10/2/2020

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

(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
9/22/2020 / /	Johnson, Christie ***Protected Voter***	S	deputy clerk	CA			\$10.00
1							
9/25/2020 / /	Johnson, Christie ***Protected Voter***	S	deputy clerk	CA			\$1,100.00
2							
9/25/2020 / /	Simon, Evelyn Highway 351 Cross City, fl 32628	I		CH			\$50.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Christie K. Johnson

(2) I.D. Number 186

(3) Cover Period 9/19/2020 through 10/2/2020

(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					
10/2/2020 / /	USPS, 26164 SE HWY 19 OLD TOWN, FL 32680	postage	MO		\$55.00
1					
9/30/2020 / /	PRINT SHOP OF CHIEFLAND, 224 N. MAIN STREET CHIEFLAND, FL 32626	color copies	MO		\$27.29
2					
9/19/2020 / /	Orion Press, 13995 SW 144th Avenue Ste 206 Miami, FL 33186	campaign postcards	MO		\$136.64
3					
9/26/2020 / /	PRINT SHOP OF CHIEFLAND, 224 N. MAIN STREET CHIEFLAND, FL 32626	color copies	MO		\$1,001.58
4					
/ /					
/ /					
/ /					
/ /					