CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Michelle Fowler Cannon	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	312 NE 146 Ave	Submitted on:								
	Address (number and street) Old Town, FL 32680	8/24/2020 16:16:12 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 189								
(4)	Check appropriate box(es):									
(-7	Clieck appropriate box(es). Candidate Office Sought: Tax Collector Political Committee (PC) Electioneering Communications Org. (ECO) 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								
Cove	er Period: From 6 / 13 / 2020 To									
<u>X</u> 0	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , <u>195</u> . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , <u>195</u> . <u>00</u>	Total Monetary \$. 281 . 13								
In-Ki	and \$, , 0.00	Total Monetary \$, , 281 . 13								
		(8) Other Distributions \$, , 000								
(9)	(9) TOTAL Monetary Contributions To Date \$\\ _\ _\ _\ _\ \\ \ \ \									
(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 Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)										
X Si	gnature	X Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Michelle Fowler Can	non		(2) I.D. Number			
	6/13/2020			/10/2020			
(3) Cover Peri	od / /	thro	ough	11_	(4) Pag	je <u>1</u>	of
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount
6/15/2020	Cannon, Michelle I 312 NE 146 AVE old Town, Fl 32680		tax collector	СН			\$195.0
1							
1 1							
1 1							
1 1							
j j							
f I							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Michel	le Fowl	ler Ca	nnon			 (2) I.D. Nun	nber	1	.89	
		6/13/2	020		9/10/20	020		-			
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
6/15/2020	LSA Media, PO Box 5030 Cross City, Fl 32628	thank you ad	МО		\$281.13
1					
8/24/2020	Cannon, Michelle F 312 NE 146 AVE Old Town, Fl 32680	refund to self	DI		\$3.27
2					
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3					,
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10 26					,
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DS-DE 14 (Rev					