	CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Barbara Sanders	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	215 West 12th St.	Submitted on:								
	Address (number and street)	4/10/2018 20:51:15 (eastern)								
	St. George Island, FL 32328 City, State, Zip Code									
	Check here if address has changed	(2) ID Number: 171								
(4)		(3) ID Number:171								
(4)	Check appropriate box(es):									
	☐ Candidate Office Sought: County Judge ☐ 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								
Cove	er Period: From $3 / 1 / 2018$ To	3 / 31 / 2018 Report Type: <u>M3</u>								
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
	,	Monetary								
Casl	n & Checks \$, 2,680.00	Expenditures \$, 1,386.34								
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$								
T-4-	I Monetary \$, 2,680.00	Office Account \$, , , 0 . 00								
rota	I Monetary \$, 2 , 680 . 00	Total Monetary \$, 1 ,386 .34								
In-Ki	nd \$, , 0.00	, <u>1</u> ,380 : 34								
III-IXI	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions								
		\$, , 000_								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>12</u> , <u>769</u> . <u>64</u>								
	(11) Ceri	ification								
	It is a first degree misdemeanor for any pers									
Ιc	ertify that I have examined this report and it is true, corr	ect, and complete:								
/T:	ype name)	(Type name)								
<u> </u>	ype name) Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC and PTY)								
	electioneering comm.)									
х		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Barbara Sande	rs			(2) I.D. Number		171		
	3/1/2018			3/31/	2018					
(3) Cover Perio	d /	1	through	1	1	(A) Page	1	of	2	

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						4C138C-3V
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &	с	ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
3/2/2018	Brooks Leboeuf	В	attorney	СН	Supplied of the state of the st		\$1,000.0
<i>I</i> ,	Bennett Foster , & Gwartney, P.A. 909 E. Park Avenue						
1	Tallahassee, FL 32301						
3/2/2018	Northern Outfitters,	В	apparel outfitters	СН			\$500.0
1 1	3260 Creek Stable Road Tallahassee, FL 32310						
2							
3/2/2018	Parrott, D.W.	I	retired	СН			\$150.0
1 1	P.O. Box 199 Shady Dale , GA 31085						
3							
3/7/2018	Hatchell, Carolyn E	B I		СН	:		\$100.0
1 1	Eastpoint, FL 32328						
4							
3/7/2018	Lenard, Brian D	I	retired	СН			\$250.0
1 1	Hammond, LA 70404						
5							
3/8/2018	Sims, Margie	I	retired	СН			\$150.0
J I	Quincy, FL 32352						
6							
3/8/2018	Decker, Gary 3620 Eighth Street Court	I		CA			\$30.0
1 1	East Moline, IL 61244						
7							
3/13/2018	Sheffield, Richard	I	retired	СН			\$250.0
1 1	2441 Zell Court Hummelstown, PA 17036						
8							
DS DE 13 /Pay 11	attendance specialists	STATE OF THE STATE	Million Processing at the part of the second	NETBUCTIONS			

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name	Barbara Sanders			(2) I.D. Numbe	er ₁	71
	3/1/2018 iod//		3	/31/2018			
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		(8) ontributor	(9) Contribution Type	(10) In-kind Description	(11)	(12) Amount
3/13/2018 / /	Watts, David H P.O. Box 190 Apalachicola, FL 32329		retired	СН	·		\$200
3/24/2018 / /	Spohrer, Bill 127 Avenue B Apalachicola, FL 32320	I		CA			\$50
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DS-DE 13 (Rev. 11/13	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	S AND CODE VAL	UES	, d

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Barbara	Sande	ers				 (2) I.D. Nun	nber	1	L71	
	3	/1/20	18		3/31/20	18					
(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
3/7/2018	Annual Charity Rib Cookoff, 24 6th Street Eastpoint, FL 32328	competition booth expense	МО		\$100.00
3/7/2018	Sanders and Duncan, P.A., P.O. Box 157 Apalachicola, FL 32328	reimbursement office supplies	RM		\$34.84
3/7/2018	WMS Group, Inc., Chase Card Services 3643 Pacific Avenue SE Olympia, WA 98501	2x3 name tags	RM		\$36.50
3/15/2018	Stearns Weaver Miller Weissler, 150 West Flagler Street, Suite 2200 Miami, FL 33130	professional services rendered	МО		\$1,215.00
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