| (1) Tamara Bibb Allen OFFICE USE | ONLY | | | | | | |
|--|-------------------------|--|--|--|--|--|--|
| Name ONLINE SUB | | | | | | | |
| (2) 1204 Gulf Ave. | :972] | | | | | | |
| Address (number and street) | 4 (eastern) | | | | | | |
| Carrabelle, FL 32322 | - (/ | | | | | | |
| City, State, Zip Code | | | | | | | |
| Check here if address has changed (3) ID Number: | 189 | | | | | | |
| (4) Check appropriate box(es): | | | | | | | |
| ☐ Candidate Office Sought: County Commission Dist. 2 | | | | | | | |
| ☐ Political Committee (PC)☐ Electioneering Communications Org. (ECO)☐ Check here if PC or ECO has disb | andod | | | | | | |
| Party Executive Committee (PTY) Check here if PTY has disbanded | anueu | | | | | | |
| ☐ Independent Expenditure (IE) (also covers an ☐ Check here if no other IE or EC re | ports will be filed | | | | | | |
| individual making electioneering communications) | | | | | | | |
| (5) Report Identifiers | | | | | | | |
| Cover Period: From 9 / 29 / 2018 To 10 / 5 / 2018 Repor | t Type: G4 | | | | | | |
| ✓ Original ☐ Amendment ☐ Special Election Report | | | | | | | |
| (6) Contributions This Report (7) Expenditures This Report | 4 | | | | | | |
| | | | | | | | |
| Cash & Checks \$, , 650 . 00 Monetary Expenditures \$, | , 49 . 47 | | | | | | |
| Loans \$, , 0.00 Transfers to | | | | | | | |
| | , 0 . 00 | | | | | | |
| Total Monetary \$, , 650 . 00 | _ , | | | | | | |
| | , 49 . 47 | | | | | | |
| In-Kind \$, 0.00 | -, | | | | | | |
| (8) Other Distributions | | | | | | | |
| \$, , | 0. 00 | | | | | | |
| | | | | | | | |
| (9) TOTAL Monetary Contributions To Date (10) TOTAL Monetary Expend | litures To Date | | | | | | |
| \$, <u>3</u> , <u>286</u> . <u>00</u> \$, <u>1</u> , <u>4</u> 1 | <u>.4</u> . <u>42</u> | | | | | | |
| (44) Contision | | | | | | | |
| (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 □ Candidate □ Chairpersor | · (anh for DC c= 1 DT/) | | | | | | |
| ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer ☐ Candidate ☐ Chairperson (only for PC and PTY) or electioneering comm.) | | | | | | | |
| | | | | | | | |
| X Signature Signature | | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name | Bibb | Allen | | | | 189 | | | | |
|----------------|------|-------|----|---------|-------|------|----------|---|-----------------|---|
| | 9/ | 29/20 | 18 | | 10/5/ | 2018 | | | | |
| (3) Cover Peri | od | 1 | 1 | through | 1 | 1 | (A) Page | 1 | of ¹ | L |

| (5) Date (6) Sequence | (7) Full Name (Last, Suffix, First, Middle) Street Address & | С | (8) ontributor | (9) Contribution | (10) In-kind | (11) | (12) |
|-----------------------|--|------|-------------------------------|------------------|-----------------|-----------|---------|
| Number | City, State, Zip Code | Туре | A CONTRACTOR OF THE PROPERTY. | Туре | Description | Amendment | Amount |
| 10/1/2018 | Swaggerty, M.K 2518 Highway 98 E Carrabelle, FL 32322 | Ĭ | retired | СН | 2.5504 | | \$100.0 |
| 10/1/2018 | Barber, Michael 433 River Road Carrabelle, FL 32322 | I | construct: on | СН | | | \$50.0 |
| 10/2/2018 | Marxsen, Peter P.O. Box 467 Lanark Village, FL 32323-04 | | commercial pilot | CH | | | \$500.0 |
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| J I | | | | | | | |
| f 1 | | | | | | | |
| 1 1 | | | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

| (1) Name _ | Tamara | Bibb | Allen | | | | (2) I.D. Nun | nber | 1 | 189 | 300 |
|-------------|--------|-------|-------|---------|---------|-----|------------------|------|----|-----|-----|
| | | 9/29/ | 2018 | | 10/5/20 | 018 | | - | | | |
| (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 |
| 10/2/2018 | Franklin County SOE, 47 Avenue F | address labels | MO | | \$49.47 |
| | Apalachicola, FL 3232 | | | | |
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