	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Tamara Bibb Allen	OFFICE USE ONLY
` '	Name	ONLINE SUBMISSION
(2)	1204 Gulf Ave.	Submitted on:
	Address (number and street)	6/8/2018 09:45:21 (eastern)
	Carrabelle, FL 32322 City, State, Zip Code	<del></del>
	Check here if address has changed	(3) ID Number: 189
(4)	_	(3) 1D Number
(4)	Check appropriate box(es):  Candidate Office Sought: County Commis	gion Digt 2
	<ul><li></li></ul>	SION DISC. Z
	☐ 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
	marriada marrig diseasi neemig communicatione)	
	(5) Report	Identifiers
Cove	er Period: From $5 / 1 / 2018$ To	5 / 31 / 2018 Report Type: M5
X O	riginal Amendment Spo	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
		Monetary
Cash	n & Checks \$ ,1 , <u>786</u> . <u>00</u>	Expenditures \$ , , 1 . 60
	Φ 0.00	
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$
Tota	I Monetary \$ , 1 , 786 . 00	Office Account \$ , , , 0 . 00
Tula	,, ,, ,	Total Monetary \$ , , 1 . 60
In-Ki	ind \$ , , 0.00	, , , ,
	,,	(8) Other Distributions
		\$ , , 000_
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$	\$ , , <u>1</u> . <u>60</u>
	(11) Ceri	tification
		on to falsify a public record (ss. 839.13, F.S.)
Ιc	ertify that I have examined this report and it is true, corr	ect, and complete:
(T	ype name)	(Type name)
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)
х		X
	gnature	Signature

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	ara Bibb	Allen		(2) I.D. Number						
	5/1/201	8		5/31/	2018					
(3) Cover Period	1	1	throuah	1	1	(4) Page	1	of <sup>1</sup>		

(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	_	(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code	Туре	Occupation	Contribution Type	In-kind Description	Amendment	Amount	
5/16/2018 / /	Hodge, Martha c 1512 E Gulf Avenue Eastpoint, FL 32328		retired	СН	·		\$1,000.0	
5/18/2018	Sleeper, Sharon P. O. Box 173 Eastpoint, FL 32328	I	retired	СН			\$100.0	
5/22/2018	Fuller, Joyce Busby 411 El Destinado Drive Tallahassee, FL 32312	I	retired	СН			\$36.(	
5/21/2018	Antekeier, Susan B 41 S Bayshore Drive #637 Eastpoint, FL 32328-3212	I	retired	СН			\$500.	
5/19/2018 / /	Wright, Patricia 2628 Lucerne Drive Tallahassee, FL 32303-2212	I	retired	СН			\$50.	
5/19/2018 / /	Christie, Lewis T 3146 Highway 98 E Carrabelle, FL 32322	I	retired	СН			\$100.	
1 1								
J J								

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name _	Tamara	Bibb	All	len		111-011			 (2	) I.D. Nu	mber	~		189	r
		5/1/2	018			5/31	/203	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
5/21/2018	Frankli County SDE, 47 Avenue F	filing fee	МО		\$1.60
1	Apalachicola, FL 3232				
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//					
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DS-DE 14 (Rev.					