

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Audrey Lewis  
 Name

(2) 303 Bill McGill Road  
 Address (number and street)

Havana, FL 32333  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1201424]

Submitted on:  
 3/9/2020 09:11:13 (eastern)

Check here if address has changed

(3) ID Number: 232

(4) Check appropriate box(es):

- Candidate Office Sought: School Board District 1
- 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

Cover Period: From 2 / 1 / 2020 To 2 / 29 / 2020 Report Type: M2

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,   1   , 000 . 00

Loans \$      ,      ,   0   . 00

Total Monetary \$      ,   1   , 000 . 00

In-Kind \$      ,      ,   0   . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      ,   12   . 10

Transfers to Office Account \$      ,      ,   0   . 00

Total Monetary \$      ,      ,   12   . 10

### (8) Other Distributions

\$      ,      ,   0   . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,   1   , 350 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      ,   12   . 10

### (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 Audrey Lewis (2) I.D. Number 232  
 (3) Cover Period 2/1/2020 through 2/29/2020 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
2/14/2020 / /	Pat Thomas & Associates, P.O. Box 1919 Quincy, FL 32353	B	insurance	CH			\$1,000.00
1							
/ /							
/ /							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Audrey Lewis

(2) I.D. Number 232

(3) Cover Period 2/1/2020 through 2/29/2020

(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					
2/18/2020 //	Supervisor of Elections, 16 South Madison Street Quincy, FL 32351	petition verification	MO		\$12.10
1					
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