CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Thomas Amos Buttram	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1213180]						
(2) 211 7th Street	Submitted on:						
Address (number and street) Port St Joe, FL 32456	6/27/2020 09:43:58 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 302						
(4) Check appropriate box(es):							
 Candidate Office Sought: <u>School Board Dist 4</u> Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) 							
(5) Report Identifiers							
Cover Period: From <u>6</u> / <u>13</u> / <u>2020</u> To	6 / <u>26</u> / <u>2020</u> Report Type: <u>P2</u>						
☑ Original	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , , 00	Monetary Expenditures \$, , , 0 . 00						
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,0.						
Total Monetary \$	Total Monetary \$, , , 0 . 00						
,,,,	(8) Other Distributions						
	\$,,000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>80</u> . <u>00</u>	\$,, <u>36</u> . <u>_80</u>						
(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 Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	<u>X</u>						
Signature	Signature						

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Thomas Amos Buttram	mas Amos Buttram			(2) I.D. Number			
	6/13/2020		6	/26/2020				
(3) Cover Peri	od / /	thro	ough	11	(4) Page	e	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount	
6/22/2020 / /	Bank, Capital City PO Box 900 Tallahassee, FL 32302	0	bank	RE	refund of bank service charge		\$20.00	
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1 1	_							
1 1								
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Thoma	CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES) Name Thomas Amos Buttram (2) I.D. Number 302							
	6/13/2020 // through	6/26/2020	4) Page <u>1</u>		0			
(5) Date (6) Sequence Number	(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			
_/ /								
_/ /								
11								
11								
_/ /								
11								
11								
_ / /								

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