

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Charlene Robinson

Name

(2) 1739 Lynn St NW

Address (number and street)

Jasper, FL 32052

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 149

(4) Check appropriate box(es):

☒ Candidate Office Sought: Tax Collector

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

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[1313162]

Submitted on:  
6/27/2024 18:13:36 (eastern)

### (5) Report Identifiers

Cover Period: From 6 / 15 / 2024 To 6 / 28 / 2024 Report Type: P2

☒ Original

☐ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 400 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 400 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 444 . 79

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 444 . 79

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        , 6 , 950 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        , 6 , 761 . 00

### (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 Charlene Robinson (2) I.D. Number 149

6/15/2024

6/28/2024

(3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (4) Page 1 of 1

[illegible]

# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Charlene Robinson

(2) I.D. Number 149

(3) Cover Period 6/15/2024 through 6/28/2024

(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
6/21/2024 / /	North Florida Printing Co Inc, 109 Tuxedo Ave Live Oak, FL 32064	yard signs & h stands	MO		\$442.79
1					
6/25/2024 / /	First Federal Bank, 499 Hatley St Jasper, FL 32052	paper statement fee	MO		\$2.00
2					
/ /					
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