CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Jessica Vaughn	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1201870]							
(2) 15924 Wyndover Road	Submitted on:							
Address (number and street) Tampa,, FL 33647	3/10/2020 11:30:05 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 1553							
(4) Check appropriate box(es):								
Candidate Office Sought: School Board	Member, Dist. 3							
Political Committee (PC)								
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	Check here if PC or ECO has disbanded Check here if PTY has disbanded							
☐ Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From <u>2</u> / <u>1</u> / <u>2020</u> To	o 2 / 29 / 2020 Report Type:							
☐ Original ☐ Amendment ☐ S	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , 00	Expenditures \$, , 400 . 00							
\$ 0.00								
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,0.00							
Total Monetary \$, , 0 . 00	······································							
	Total Monetary \$, ,400.00							
In-Kind \$,,0.00	· · · · · · · · · · · · · · · · · · ·							
	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u>1</u> , <u>058</u> . <u>00</u>	\$, 923.32							
(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)							
or electioneering comm.)								
X	x							
Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	ame (2) I.D. Number						553
	2/1/2020	2/29/2020					
(3) Cover Perio	od/ /	thro	ough	11	(4) Pag	e 1	of ⁰
		1		l.			
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1	-						
1 1	-						
1 1	_						
			-				
1 1							
	-						
1 1							
1 1							
	-						
1 1							
	-						
1 1							
1 1	-						

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Jess) EXPENDITURES 2) I.D. Number		1553	
(3) Cover Period	2/1/2020 I/through_	2/29/2020 //	(4) Page <u>1</u>	of	1	
(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	
	Patterson , Russell 8701 Elmdale Place Tampa, FL 33637	refund of campaign contribution.	RE		\$200.00	
2/1/2020 / / 2	Gale, Candy Individual 8701 Elmdale Place Tampa, FL 33637	refund of campaign contribution.	RE		\$200.00	
_ / /						
_/ /						
//						
//						
_ / /						
11						

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES