CAMPAIGN TREASURER'S REPORT SUMMARY						
(1)	Jennifer Rose Hill	OFFICE USE ONLY				
	Name	ONLINE SUBMISSION				
(2)	515 Duque Road	Submitted on:				
	Address (number and street)	6/7/2020 08:36:24 (eastern)				
	Lutz, FL 33549 City State Zin Code					
	City, State, Zip Code	(2) 10 Normalism				
	Check here if address has changed	(3) ID Number:1851				
(4)	Check appropriate box(es):					
	☐ Candidate Office Sought: School Board I	Member, Dist. 3				
	☐ 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				
	mundual making electioneering communications,					
	(5) Report	Identifiers				
Cove	er Period: From <u>5</u> / <u>1</u> / <u>2020</u> To	5 / 31 / 2020 Report Type: M5				
X O	Original Amendment Spe	ecial Election Report				
(6)	Contributions This Report	(7) Expenditures This Report				
		Monetary				
Cash	h & Checks \$, 2 , <u>020</u> . <u>00</u>	Expenditures \$, , 0 . 00				
	Φ 0.00					
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$				
T-1-	\$ 2 020 00	Office Account \$, , , 0 . 00				
lota	al Monetary \$,2 , <u>020</u> . <u>00</u>	Total Monetary \$. 0 . 00				
i. Z		Total Monetary \$, , 0 . 00				
In-Ki	ind \$,,,000	(0) Other Dietaihtions				
		(8) Other Distributions \$, , 000_				
		,, <u>,,,</u>				
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
	\$, <u>2</u> , <u>020</u> . <u>00</u>	\$, , <u>0</u> . <u>00</u>				
	(44) Cont	100				
	(11) Cert It is a first degree misdemeanor for any perso					
I certify that I have examined this report and it is true, correct, and complete:						
	ype name)	(Type name)				
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)				
v		V				
Si	ignature	X Signature				

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Jennifer Rose Hill			(2) I.D. Number				
	5/1/2020			5/31/2020				
(3) Cover Pe	riod / /	thro	ough	11_	(4) Page	1	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
5/21/2020	Hill, Jennifer R ***Protected Voter***		teacher	СН	Весоприон		\$2,020.0	
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1 1								
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1 1								
1 1								
1 1								
1 1								

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

	fer Rose Hill 5/1/2020 5/	31/2020	2) I.D. Numbe	-	
Cover Period	/through		4) Page <u>1</u>	of	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)	(11)
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SS-DE 14 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES						