

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Chase Harrison  
 Name

(2) 817 E. Conover St.  
 Address (number and street)

Tampa, FL 33603  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1255287]

Submitted on:  
 2/10/2022 13:21:53 (eastern)

Check here if address has changed (3) ID Number: 2120

(4) Check appropriate box(es):

Candidate Office Sought: County Commissioner, Dist. 7

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 1 / 1 / 2022 To 1 / 31 / 2022 Report Type: M1

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 878 . 82

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 878 . 82

In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        ,        , 253 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 253 . 00

**(8) Other Distributions**  
 \$        ,        , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$        ,        , 5 , 788 . 59

**(10) TOTAL Monetary Expenditures To Date**  
 \$        ,        , 1 , 461 . 63

### (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 Chase Harrison (2) I.D. Number 2120  
 1/1/2022 through 1/31/2022  
 (3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number						
1/12/2022 / /	RAY, PAUL 9211 Dayflower Drive tampa, fl 33647	I retired/re tired	CH			\$50.00
1						
1/20/2022 / /	MORRISON, ANGEL 50215 US HIGHWAY 59 HODGEN, OK 74939	I lcsec dir/heaven er pub-s	CH			\$25.00
2						
1/22/2022 / /	KLEIST, CAROLYN 13010 PRESTWICK DR RIVERVIEW, FL 33579	I retired/re tired	CH			\$50.00
3						
1/26/2022 / /	BRADLEY, THOMAS 18309 Cypress Haven Drive TAMPA, FL 33647	I saftry manager/us f	CH			\$50.00
4						
1/12/2022 / /	CASEY A FLETCHER, CPS , PO BOX 819 BARTOW, FL 33831	I cpa/self employed	CH			\$253.82
5						
1/12/2022 / /	HI LINE IMPORTS INC , 5008 N GRADY AVE TAMPA, FL 33614	B owner/hi line imports	CH			\$250.00
6						
1/11/2022 / /	SOUTHWICK, PAUL RESTRICTED/PROTECTED TAMPA, FL 33603	I retired/re tired	CH			\$100.00
7						
1/11/2022 / /	MANNE, BRIAN 306 E FLORA ST TAMPA, FL 33604	I retired/re tired	CH			\$100.00
8						

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Chase Harrison

(2) I.D. Number 2120

(3) Cover Period 1/1/2022 through 1/31/2022

(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					
1/31/2022 / /	NOBIS FINANCIAL, 817 EAST CONOVER ST TAMPA, FL 33603-	mthly financial reporting	MO		\$250.00
1					
1/10/2022 / /	SUNTRUST BANK, 1701 E 7TH AVE TAMPA, FL 33605-	banking fee	MO		\$3.00
2					
/ /					
/ /					
/ /					
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/ /					