CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Alicia Whiting Bozich	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	401 E. Jackson Street; Suite 2225	Submitted on:					
	Address (number and street)	2/10/2022 08:54:25 (eastern)					
	Tampa, FL 33602						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number: 2130					
(4) Check appropriate box(es):							
	<ul> <li>☐ Candidate Office Sought: County Court Judge, Grp. 14</li> <li>☐ Political Committee (PC)</li> <li>☐ Electioneering Communications Org. (ECO)</li> <li>☐ Party Executive Committee (PTY)</li> <li>☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)</li> <li>☐ Check here if PTY has disbanded</li> <li>☐ Check here if no other IE or EC reports will be filed</li> </ul>						
	(5) Report	Identifiers					
Cove	er Period: From $1 / 1 / 2022$ To						
		ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
Cash & Checks \$ , , <u>114</u> . <u>00</u>		Monetary					
Loans \$,,,		Transfers to Office Account \$ , , , 0 . 00					
Tota	I Monetary \$ , , <u>114</u> . <u>00</u>	TatalManatana					
In-Ki	sind \$,,,000	Total Monetary \$ , , 0 . 00					
		(8) Other Distributions \$ , , 000_					
(9)	TOTAL Monetary Contributions To Date \$ , , _11400	(10) TOTAL Monetary Expenditures To Date \$,,					
(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.)   Deputy Treasurer   Candidate   Chairperson (only for PC and PTY)							
<u>X</u>		<u>X</u>					
Si	gnature	Signature					

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	Alicia Whiting Boz		(2) I.D. Number				
	1/1/2022		1	/31/2022		-	-
(3) Cover Perio	od/	thre	ough	11_	(4) Page	<u> </u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount
1/28/2022	Bozich, Nancy A. 6614 Thackston Drive Riverview, FL 33578	1	retired	СН			\$114.0
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f I							
1 1							
1 1							
DS-DE 13 (Rev. 11/1	3)	SEE RE	 EVERSE FOR I	  NSTRUCTIONS	AND CODE VALU	JES	

) Name Alicia	Whiting Bozich 1/1/2022 1	./31/2022	2) I.D. Numbe		2130
3) 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) Amount
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DS-DE 14 (Rev. 11/13 )  SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES							