	CAMPAIGN TREASURE	R'S REPORT SUMMARY							
(1)	Shirley Owens	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1206478]							
(2)	1672 Hwy 173	Submitted on:							
	Address (number and street) Graceville, FL 32440	5/8/2020 15:41:33 (eastern)							
-	City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 128							
(4)	Check appropriate box(es):								
	 ∑ Candidate Office Sought: School Board, District 4 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 								
	(5) Report	Identifiers							
Cove	er Period: From 4 / 1 / 2020 To	4 / 30 / 2020 Report Type: M4							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
	n & Checks \$, , 0 . <u>00</u>	Monetary							
Loans		Transfers to Office Account \$, , , 0 . 00							
	Monetary \$,,	Total Monetary \$, , 0 . 00							
In-Kir	nd \$,, <u>12</u> .00	(8) Other Distributions \$, , 000							
	TOTAL Monetary Contributions To Date \$, , 000_	(10) TOTAL Monetary Expenditures To Date \$, , 0 00_							
(Ty _l	(11) Cert It is a first degree misdemeanor for any person ertify that I have examined this report and it is true, corre (pe name) Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	on to falsify a public record (ss. 839.13, F.S.)							
	unature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Shirley Owens		(2) I.D. Number 128				
	4/1/2020		4	:/30/2020			
(3) Cover Perio	od//	thro	ough	11	(4) Page	1	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	5:00	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
»	Owens, Shirley		retired	IK	petitions	3.3.11011.0111.0111	\$12.0
4/28/2020	1672 Highway 173 Graceville, Fl 32440						
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DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR	INSTRUCTIONS	S AND CODE VALU	JES	

4/1/2020 4/	30/2020	100 AL-10	10	
/through	_/(2	I) Page <u>1</u>	of	0
(7) Full Name (Last, Suffix, First, Middle)	(8) Purpose (add office sought if	(9)	(10)	(11)
City, State, Zip Code	contribution to a candidate)	Туре	Amendment	Amount
	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(7) (8) Full Name Purpose (Last, Suffix, First, Middle) (add office sought if contribution to a	(7) (8) (9) Full Name Purpose (Last, Suffix, First, Middle) (add office sought if contribution to a Expenditure	(7) (8) (9) (10) Full Name Purpose (Last, Suffix, First, Middle) (add office sought if Street Address & contribution to a