

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY
ONLINE SUBMISSION
 [1245271]

Submitted on:
 4/12/2021 17:09:26 (eastern)

(1) _____
 Name
 (2) P.O. Box 5853
 Address (number and street)
Marianna, FL 32447
 City, State, Zip Code

Check here if address has changed

(3) ID Number: 131

(4) Check appropriate box(es):

- | | |
|--|--|
| <input type="checkbox"/> Candidate Office Sought: _____ | <input type="checkbox"/> Check here if PC or ECO has disbanded |
| <input type="checkbox"/> Political Committee (PC) | <input type="checkbox"/> Check here if PTY has disbanded |
| <input type="checkbox"/> Electioneering Communications Org. (ECO) | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input checked="" type="checkbox"/> Party Executive Committee (PTY) | |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) | |

(5) Report Identifiers

Cover Period: From 1 / 1 / 2021 To 3 / 31 / 2021 Report Type: Q1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00
 Loans \$ _____ , _____ , 0 . 00
 Total Monetary \$ _____ , _____ , 0 . 00
 In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 150 . 00
 Transfers to Office Account \$ _____ , _____ , 0 . 00
 Total Monetary \$ _____ , _____ , 150 . 00

(8) Other Distributions

\$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$ _____ , 130 , 798 . 63

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 87 , 767 . 22

(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 _____ (2) I.D. Number 131

(3) Cover Period 1/1/2021 through 3/31/2021 (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _____

(2) I.D. Number 131

(3) Cover Period 1/1/2021 through 3/31/2021

(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					
1/9/2021 //	FOP Small County Coalition, 549 Magnolia Ave Sebring, FL 33870	dues small county coalition	MO		\$100.00
1					
2/14/2021 //	Dourney, Tamara 2998 Madison St Marianna, FL 32446	art design	MO		\$50.00
2					
//					
//					
//					
//					
//					