

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ronstance L. Pittman  
 Name

(2) 4777 Country Lake Drive  
 Address (number and street)

Marianna, FL 32446  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1208025]

Submitted on:  
 6/2/2020 14:54:40 (eastern)

Check here if address has changed

(3) ID Number: 313

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner District 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

### (5) Report Identifiers

Cover Period: From 5 / 1 / 2020 To 5 / 31 / 2020 Report Type: M5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,      , 50 . 00

Loans \$      ,      , 0 . 00

Total Monetary \$      ,      , 50 . 00

In-Kind \$      ,      , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      , 210 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 210 . 00

### (8) Other Distributions

\$      ,      , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      , 5 , 305 . 08

### (10) TOTAL Monetary Expenditures To Date

\$      , 3 , 947 . 53

### (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 Ronstance L. Pittman (2) I.D. Number 313

(3) Cover Period 5/1/2020 through 5/31/2020 (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
5/31/2020 / /	White, Monica P.O. Box 121 Marianna, FL 32447	I	re-entry coordinator	CH			\$50.00
1							
/ /							
/ /							
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Ronstance L. Pittman

(2) I.D. Number 313

(3) Cover Period 5/1/2020 through 5/31/2020

(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					
5/20/2020 / /	Jackson County Times, 2866 Madison Street Marianna, Fl 32448	graduation 2020-half page ad	MO		\$150.00
1					
5/20/2020 / /	Jackson County Floridan, 4403 Constitution Lane Marianna, FL 32448	memorial day tribute	MO		\$60.00
2					
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