	CAMPAIGN TREASURE	R'S REPORT SUMMARY					
(1)	Clayton O. Rooks, III	OFFICE USE ONLY					
	Name	ONLINE SUBMISSION					
(2)	2438 Fillmore Drive	Submitted on:					
	Address (number and street)	5/5/2020 15:29:16 (eastern)					
	Marianna, FL 32448						
	City, State, Zip Code						
	Check here if address has changed	(3) ID Number:326					
(4)	Check appropriate box(es):						
		Circuit Court and Comptroller					
	Political Committee (PC)	□ 01 - d. b '/ 20 500 b disbouded					
		☐ Check here if PC or ECO has disbanded☐ Check here if PTY has disbanded					
		☐ Check here if no other IE or EC reports will be filed					
	individual making electioneering communications)						
	(5) P (
_		Identifiers					
Cove	er Period: From $\frac{4}{2}$ / $\frac{1}{2}$ / $\frac{2020}{20}$ To	4 / 30 / 2020 Report Type: M4					
<u>X</u> 0	Original Amendment Spe	ecial Election Report					
(6)	Contributions This Report	(7) Expenditures This Report					
	ļ	Monetary					
Casl	h & Checks \$, , 0 . 00	Expenditures \$, , 32 . 00					
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to					
		Office Account \$, , , 0 . 00					
Tota	Il Monetary \$, , 000						
		Total Monetary \$, , _32 . 00					
In-Ki	ind \$,,000						
		(8) Other Distributions					
		\$,, <u>0</u> . <u>00</u>					
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date					
(-,	\$,10_, _00000	\$, , 49 . 88_					
		,,					
	(11) Cert						
	It is a first degree misdemeanor for any person	on 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) (Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)					
	electioneering comm.)						
х		X					
	gnature	Signature					

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Clayton O. Rooks, III				(2) I.D. Number					
	4/1/2020		4	/30/2020					
(3) Cover Perio	od / /	thro	ough	11	(4) Pag	e	of		
-				r					
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)		e verbalde automo	Cantaitratian	for takest				
Sequence Number	Street Address & City, State, Zip Code	Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
Number	Oity, State, Zip Code	Туре	Occupation	туре	Description	2 and indirect	Amount		
1									
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1 1									

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name <u></u>	Clayton O.	Rooks,	III			(2) I.D. Num	nber	3	326	
	4/1/	/2020		4/30/20	20					
(3) Cover P	eriod /	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
1	Supervisor of Elections, 2851 Jefferson Street Marianna, FL 32448	petition verification	MO		\$28.00
4/6/2020	Suppervisor of Elections, 2851 Jefferson Street Marianna, FL 32448	verification of petitions	МО		\$2.00
4/8/2020	Supervisor of Elections, 2851 Jefferson Street Marianna, FL 32448	petition verification	MO		\$2.00
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DS-DE 14 (Rev					