	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Mary Ann Hutton	OFFICE USE ONLY
` '	Name	ONLINE SUBMISSION
(2)	P.O. Box 1135	Submitted on:
	Address (number and street)	8/2/2024 15:31:17 (eastern)
	Marianna, F1 32447 City, State, Zip Code	
		(0) ID N
	Check here if address has changed	(3) ID Number:353
(4)	Check appropriate box(es):	
	☐ Candidate Office Sought: County Commis☐ Political Committee (PC)	sioner District 3
	☐ 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
	individual making electioneering communications)	
	(5) Report	Identifiers
Cove	er Period: From $\frac{7}{20}$ / $\frac{20}{2024}$ To	7 / 26 / 2024 Report Type: P5
⊠ o	riginal Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
		Monetary
Cash & Checks \$,,		Expenditures \$, , 0 . 00
	Φ 0.00	
Loans \$,,		Transfers to Office Account \$
Tota	I Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00
Tula	,,,,	Total Monetary \$, , 0 . 00
In-Ki	ind \$, , 100.00	, , ,
111 131	,,,,,	(8) Other Distributions
		\$, , 000_
(0)		
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$	\$, <u>40</u> , <u>960</u> . <u>40</u>
	(11) Cert	tification
	It is a first degree misdemeanor for any pers	on to falsify a public record (ss. 839.13, F.S.)
Ιc	certify that I have examined this report and it is true, corr	ect, and complete:
(T	ype name)	(Type name)
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)
х		×
	gnature	Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name		(2) I.D. Number						
	7/20/2024			/26/2024				
(3) Cover Perio	od / /	thro			(4) Page	1	of 1	
1006 98			1450		F			
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name							
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &		ontributor 	Contribution	In-kind			
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount	
7/21/2024	Hutton, Mary Ann 4392 River Forest Road	S	candidate	IK	food		\$100.0	
J I	MARIANNA, FL 32446							
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1 1								
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1 1								
1 1								
1 1								

DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

Name Mary A	7/20/2024	7/26/2024	(2) I.D. Number		353
Cover Period _	7/20/2024 /through_	//26/2024 /	(4) Page1	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 is contribution to a candidate)	(9) if Expenditure Type	(10)	(11)
//					
//					
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