

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Monique Richardson
 Name
 (2) PO Box 12195
 Address (number and street)
Tallahassee, FL 32317
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1092831]
 Submitted on:
 10/16/2015 13:20:17 (eastern)

Check here if address has changed

(3) ID Number: 394

(4) Check appropriate box(es):

- Candidate Office Sought: Leon County Judge - Seat 2
- 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 9 / 1 / 2015 To 9 / 30 / 2015 Report Type: M9

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 \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 34 , 790 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 6 , 750 . 07

(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 Monique Richardson (2) I.D. Number 394
 (3) Cover Period 9/1/2015 through 9/30/2015 (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
(6) Sequence Number						
9/14/2015 / /	Pride, Lucy H. 3191 Connector Drive Tallahassee, FL 32303	I program supervisor	CH		Delete	\$200.00
1						
9/14/2015 / /	Pride, Lucy H. 3191 Connector Drive Tallahassee, FL 32303	I a.c. pr supervisor	CH		Add	\$200.00
2						
9/15/2015 / /	Yates, Elizabeth E. 3003 Donna Drive Jacksonville, FL 32208	I administra tor	CH		Delete	\$250.00
3						
9/15/2015 / /	Yates, Elizabeth E. 3003 Donna Drive Jacksonville, FL 32208	I presiding elder	CH		Add	\$250.00
4						
9/26/2015 / /	Simmons, Garry D. 6777 Heartland Circle Tallahassee, FL 32312	I business owner	CH		Delete	\$1,000.00
5						
9/26/2015 / /	Simmons, Garry D. 6777 Heartland Circle Tallahassee, FL 32312	I data set ready owner	CH		Add	\$1,000.00
6						
/ /						
/ /						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Monique Richardson

(2) I.D. Number 394

(3) Cover Period 9/1/2015 through 9/30/2015

(4) Page 1 of 0

(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					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					