	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Tena Pate	OFFICE USE ONLY
` '	Name	ONLINE SUBMISSION
(2)	2640-A Mitcham Dr	Submitted on:
	Address (number and street)	8/19/2016 08:53:24 (eastern)
	Tallahassee, FL 32308	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number: 433
(4)	Check appropriate box(es):	
	Candidate Office Sought: Leon County S	upervisor of Elections
	☐ 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	Check here if no other IE or EC reports will be filed
	individual making electioneering communications)	
	(5) Report	Identifiers
Cove	er Period: From 8 / 6 / 2016 To	8 / 12 / 2016 Report Type: P6
X o	riginal Amendment Spe	ecial Election Report
(6)	Contributions This Report	(7) Expenditures This Report
. ,		Monetary
Cash	n & Checks \$, , 300 . 00	Expenditures \$, , 12 . 60
		
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to
		Office Account \$, , , 0 . 00
Tota	I Monetary \$, , <u>300</u> . <u>00</u>	
		Total Monetary \$, , <u>12</u> . <u>60</u>
In-Ki	nd \$,,, <u>0</u> . <u>00</u>	
		(8) Other Distributions
		\$, , <u>0</u> . <u>00</u>
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$, <u>18</u> , <u>503</u> . <u>00</u>	\$, <u>13</u> , <u>764</u> . <u>77</u>
	(11) Cert It is a first degree misdemeanor for any pers	cification
1		• • • • • • • • • • • • • • • • • • • •
10	ertify 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)
X		×
	gnature	Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Tena	a Pate			(2) I.D. Number 433							
(3) Cover Period	8/6/2016 /	_ / _	through	8/12/ /	′2016 /	(4) Page	1	_ of _	L		

V-20 E4	ou	_			(4) Faç		OI*
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) ontributor Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
8/11/2016 / /	Oakley, James E. 1804 W Indianhead Dr Tallahassee, FL 323010000	Î		СН	÷		\$50.0
8/11/2016 / /	Pate, Craig 4029 Riverwood Rd Tallahassee, FL 323030000	I	cancer center director	СН			\$250.0
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name <u></u>	Tena Pate								 (2) I.D. Nun	4	433			
		8/6	/20	16			8/12	/20	16	•- •	-			
(3) Cover Pe	eriod		1	1	30	through	1	ę.	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
8/12/2016	Donate Bucket, 1779 N University Drive Suite 102 Pembroke Pines, FL 330240000	service charge	MO		\$12.60
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