

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) David Hawkins  
 Name  
 (2) 7680 Talley Ann Dr  
 Address (number and street)  
Tallahsee, fl 32311  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1185261]  
 Submitted on:  
 3/1/2019 21:30:10 (eastern)

Check here if address has changed (3) ID Number: 490

(4) Check appropriate box(es):  
 Candidate Office Sought: Leon County Commission - At Large, Group 1  
 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 2 / 1 / 2019 To 2 / 28 / 2019 Report Type: 19M2  
 Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,   1   , 100 . 00  
 Loans \$      ,      ,   0   . 00  
 Total Monetary \$      ,   1   , 100 . 00  
 In-Kind \$      ,      ,   0   . 00

**(7) Expenditures This Report**

Monetary Expenditures \$      ,      ,   2   . 75  
 Transfers to Office Account \$      ,      ,   0   . 00  
 Total Monetary \$      ,      ,   2   . 75

**(8) Other Distributions**  
 \$      ,      ,   0   . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$      ,   3   , 200 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,      ,  14   . 50

### (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 David Hawkins (2) I.D. Number 490  
 (3) Cover Period 2/1/2019 through 2/28/2019 (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							
2/19/2019 / /	Hawkins, David T 7680 Talley Ann DR. Tallahassee, FL 32311	S	state employee	CA			\$100.00
1							
2/26/2019 / /	Hawkins, David T 7680 Talley Ann Dr. Tallahassee, FL 32311	S	state employee	CA			\$1,000.00
2							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name David Hawkins

(2) I.D. Number 490

(3) Cover Period 2/1/2019 through 2/28/2019

(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					
2/19/2019 //	Square, Inc., 1455 Market St. Suite 600 San Francisco, CA 94103	transaction fee	MO		\$2.75
1					
//					
//					
//					
//					
//					
//					
//					