CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Trish Brown	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	1919 Dawsey St., Apt 2	Submitted on:								
	Address (number and street)	11/16/2020 19:19:27 (eastern)								
	Tallahassee, FL 32303									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:567								
(4)	Check appropriate box(es):									
	Candidate Office Sought: Tallahassee C	ity Commission - 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	☐ Check here if no other IE or EC reports will be filed								
	individual making electioneering communications)									
(5) Report Identifiers										
Cove		11 / 16 / 2020 Report Type: 20T3								
		ecial Election Report								
		l ·								
(6)	Contributions This Report	(7) Expenditures This Report								
Cash	n & Checks \$, , ,000	Monetary								
Loar	s \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00								
Tota	I Monetary \$, , 000	Total Monetary \$, , 75 . 00								
In-Ki	nd \$, , 0.00	,, ,, ,								
	····	(8) Other Distributions								
		\$,,000								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$	\$, <u>1</u> , <u>269</u> . <u>25</u>								
	(11) Cerl It is a first degree misdemeanor for any pers									
I certify that I have examined this report and it is true, correct, and complete:										
(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
х		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Trish Brown	(2) I.D. Number							
	8/14/2020 od / /		11/16/2020	(4) Paç	ge <u>1</u>	of			
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)			
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupa	10.001000000000000000000000000000000000	In-kind Description	Amendment	Amount			
J 1									
1 1									
1 1									
1 1									
1 1									
l l									
I I									
J I	_								

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Tris	h Bro	wn					_ (2) I.D. Nu	ımber		567	
	8/1	4/2	020		11/16/	2020		-			
(3) Cover Period	1	1	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
11/16/2020	Abraham, Anita 11500 Summit West Blvd Temple Terrace, FL 33617	contribution refund; termination report	RE		\$25.00
11/16/2020	Abraham, Anita 11500 Summit West Blvd 28f Temple Terrace, FL 33617	contribution refund; termination report	RE		\$25.00
11/16/2020	Lewis, Carla 602 Riverview Dr Carrabelle, FL 32322	contribution refund; termination report	RE		\$25.00
11/16/2020	Sustainable Tallahassee Carbon, P.O. Box 765 Tallahassee, FL 32302	donation to eligible non-profit for remaining funds, and campaign	DI		\$94.00
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