

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Jacqueline Porter
 Name
 (2) PO Box 884
 Address (number and street)
Tallahassee, FL 32302
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1201260]

Submitted on:
 3/7/2020 13:56:41 (eastern)

Check here if address has changed (3) ID Number: 581

(4) Check appropriate box(es):

Candidate Office Sought: Tallahassee City Commission - Seat 1

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 2 / 1 / 2020 To 2 / 29 / 2020 Report Type: 20M2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 20 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 20 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , -100 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , -100 . 00

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

(9) TOTAL Monetary Contributions To Date
 \$, 31 , 773 . 98

(10) TOTAL Monetary Expenditures To Date
 \$, 6 , 864 . 72

(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 Jacqueline Porter (2) I.D. Number 581
 (3) Cover Period 2/1/2020 through 2/29/2020 (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
2/2/2020 / /	Schroder, Sally 1405 Lola Drive Tallahassee, FL 32301	I	medical professional al	CA		Add	\$20.00
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Jacqueline Porter

(2) I.D. Number 581

(3) Cover Period 2/1/2020 through 2/29/2020

(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					
2/29/2020 //	Webber, Jonathan 2032 Wahalaw Nene Tallahassee, FL 32301	refund	RE	Add	\$-100.00
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