CAMPAIGN TREASURER'S REPORT SUMMARY											
(1)	Dee Dee Rasmussen	OFFICE USE ONLY									
` '	Name	ONLINE SUBMISSION									
(2)	2640-A Mitcham Drive	Submitted on:									
	Address (number and street)	1/10/2020 16:36:52 (eastern)									
	Tallahassee, FL 32308										
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number:589									
(4)	Check appropriate box(es):										
	☐ Candidate Office Sought: Leon County S	chool Board - District 4									
	Political Committee (PC)	☐ Check here if PC or ECO has disbanded									
	☐ Electioneering Communications Org. (ECO) ☐ 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		12 / 31 / 2019 Report Type: 19M12									
	Original Amendment Spo	ecial Election Report T									
(6)	Contributions This Report	(7) Expenditures This Report									
Casl	h & Checks \$, , , 000	Monetary									
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00									
Tota	Il Monetary \$, , , 0 . 00	Total Monetary \$, , 395 . 00									
In-Ki	ind \$, , 342 . 35										
		(8) Other Distributions									
		\$,, <u>0</u> . <u>00</u>									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$,8, _70000	\$, 1 , 335 . 20									
		tification on 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:											
(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	Dee Dee Rasmussen				(2) I.D. Numbe	r	589
	12/1/2019			2/31/2019			_
(3) Cover Per	iod//	through	36	<i>I I</i>	(4) Pag	e <u>1</u>	of
(5) Date	(7) Full Name	(8)		(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Contrib	VAES-NO-004-00377	Contribution	In-kind	Amendment	A
Number	City, State, Zip Code Line1	Type Occ		Type IK	Description	Amenument	Amount
12/13/2019	Communications Inc		ephone vice	IK	phone & voicemail services		\$342.
1	3411 Capital Medical Blvd Tallahassee, FL 323080000						
1 1							
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f I							
Ĭ I							
J I							
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Dee De	e	Rasmu	ssen					 (2) I.D. Nun	nber	5	589	
		1:	2/1/20)19		12/3	31/	2019					
(3) Cover Po	eriod		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
12/30/2019	Carroll and Company, CPAs, , 2640-A Mitcham Drive Tallahassee, FL 323080000	accounting services	МО		\$395.00
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