CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Rosanne Wood	OFFICE USE ONLY							
` '	Name	ONLINE SUBMISSION							
(2)	2264 Grassroots Way	[1208420] Submitted on:							
	Address (number and street)	6/4/2020 14:24:26 (eastern)							
	Tallahassee, FL 32311	(74/2020 11·21·20 (captern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 599							
(4)	Check appropriate box(es):								
	☐ Candidate Office Sought: Leon County So	chool Board - District 2							
	Political Committee (PC)	□ 01 = 1 h !5 D0 = 500 has disheaded							
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded							
		☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)								
	(5) Report	dentifiers							
Cove		5 / 31 / 2020 Report Type: 20M5							
		ecial Election Report							
		<u> </u>							
(6)	Contributions This Report	(7) Expenditures This Report							
Cash	h & Checks \$ , , 0 . 00	Monetary							
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$ , , 0 . 00							
Tota	al Monetary \$ , , 0 . <u>00</u>	Total Monetary \$ , , 170 . 50							
In-Ki	ind \$ , , 0.00	,,,							
		(8) Other Distributions							
		\$,,000							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>22</u> , <u>941</u> . <u>00</u>	\$, <u>2</u> , <u>481</u> . <u>02</u>							
	(11) Cert It is a first degree misdemeanor for any perso								
Ιc	certify that I have examined this report and it is true, corre	rect, and complete:							
(T	ype name)	(Type name)							
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
Х		×							
	ignature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Rosanne Wood				2) I.D. Numbe	er <u>5</u>	99
	5/1/2020 od / /	thro	5 ough	/31/2020 //	(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence Number	(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)	(12)
/ /	Oity, Otate, 219 Oode	Турс	Secupation	Турс	Description		Amount
J I							
1 1							
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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 _	Rosanne Wood						 (2) I.D. Nun	nber	599		
	5	/1/20	20		5/31/20	020					
(3) Cover P	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
5/1/2020	BB&T , 102 N S Blairstone Rd Tallahassee, FL 323010000	manage users fee	МО		\$5.00
1					
5/21/2020	BB&T , 102 N S Blairstone Rd Tallahassee, FL 323010000	service charge	МО		\$3.00
2					
5/27/2020	Harvard & Associates CPA '1408 N Piedmont Way	accounting	MO		\$162.50
3	Tallahassee, FL 323080000				
//					
//					
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//					
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DS DE 14 (Pay					