CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Robin Colson	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	2350 Phillips Rd. Apt. 1104	Submitted on:								
	Address (number and street)	7/23/2020 17:47:43 (eastern)								
	Tallahassee, FL 32308 City, State, Zip Code									
	_	(2) ID N - 1								
	Check here if address has changed	(3) ID Number: 601								
(4)	Check appropriate box(es):									
	 ☐ Candidate Office Sought: Leon County Commission - At Large, Group 1 ☐ Political Committee (PC) ☐ 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 PTY has disbanded ☐ Check here if no other IE or EC reports will be filed individual making electioneering communications) 									
	(5) Report	Identifiers								
Cove	er Period: From 6 / <u>27</u> / <u>202</u> 0 To	7 / 10 / 2020 Report Type: 20P3								
	riginal 🖾 Amendment 🗌 Spo	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , ,000	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , , 000	Total Monetary \$, ,0 . 20								
In-Ki	ind \$, , 0 . 00	, , , ,								
		(8) Other Distributions \$, , 000_								
(9)	(9) TOTAL Monetary Contributions To Date \$,4, _355 \cdot _00									
(T	(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 Deputy Treasurer									
X		<u>X</u>								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Robin Colson				2) I.D. Numbe	er <u>6</u>	01
	6/27/2020 od////	thro		/10/2020 ///	(4) Pag	e	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8) Contributor		(9)	(10)	(11)	(12)
Number / /	City, State, Zip Code	Туре	Occupation	Туре	Description	Allendment	Amount
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _F	Robin	Colson	110				 (2) I.D. Nur	nber	6	501	
		6/27/2	2020		7/10/2	020		-			
(3) Cover Po	eriod	1	1	through	/	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
7/10/2020	Anedot, Anedot 1340 Poydras Street Suite 1770 New Orleans, LA 70012	web transaction processing fee	MO	Delete	\$4.50
7/10/2020	Anedot, Anedot 1340 Poydras Street Suite 1770 New Orleans, LA 70012	web transaction processing fee	MO	Add	\$4.30
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