CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Suzanne Van Wyk	OFFICE USE ONLY								
` '	Name	ONLINE SUBMISSION								
(2)	5947 Heartland Circle	Submitted on:								
	Address (number and street)	8/1/2018 11:58:08 (eastern)								
	Tallahassee, FL 32312	3,2,232 22 33 33 (3823232)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 495								
(4)	Check appropriate box(es):									
	Candidate Office Sought: Leon County J	udge - Seat 3								
	Political Committee (PC)	Chack hare if PC or ECO has dishanded								
	 ☐ Electioneering Communications Org. (ECO) ☐ Check here if PC or ECO has disbanded ☐ 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	er Period: From 6 / 23 / 2018 To	7 / 6 / 2018 Report Type: P2								
		ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
(0)	Contributions This Report	Monetary								
Cast	n & Checks \$, , -100. 00	Expenditures \$, , 0 . 00								
ouo.	7 <u> </u>									
Loar	ns \$,,,000	Transfers to								
		Office Account \$, , 0 . 00								
Tota	I Monetary \$, ,10000									
		Total Monetary \$, , 0 . 00								
In-Ki	ind \$, , 0 . <u>00</u>									
		(8) Other Distributions								
		\$, , <u>0</u> . <u>00</u>								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$, 53 , 700 . 00	\$, <u>28</u> , <u>585</u> . <u>80</u>								
		tification on to falsify a public record (ss. 839.13, F.S.)								
1										
1 0	certify that I have examined this report and it is true, corr	ect, and complete.								
_(T	ype name)	(Type name)								
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
Х		×								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Suzanne Van Wyk	(2) I.D. Number						
	6/23/2018			/6/2018			-	
(3) Cover Peri	od//	thro			(4) Pag	je <u>1</u>	of	
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code Hinson, Jennifer	Туре	ontributor Occupation	Contribution Type CH	In-kind Description	Amendment	Amount \$200.0	
7/2/2018	2520 Chamberlin Drive Tallahassee, FL 32308	_	accorney	CII		Delete	\$200.0	
1								
7/2/2018	Hinson, Jennifer 2520 Chamberlin Drive Tallahassee, FL 32308	I	attorney	СН		Add	\$100.0	
2								
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j j								
1 1	_							
1 1								
1 1	-							

(1) Name <u>Suzann</u>	AMPAIGN TREASURER e Van Wyk		ED EXPENDITURES (2) I.D. Number 495			
(3) Cover Period _	6/23/2018 /through	7/6/2018	(4) Page1	of	0	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sough contribution to candidate)	(9) at if a Expenditure Type	(10)	(11) Amount	
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