

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Carrie Litherland
 Name

(2) 1102 Seminole Dr
 Address (number and street)

Tallahassee, FL 32301
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1179697]

Submitted on:
 11/12/2018 14:51:34 (eastern)

Check here if address has changed

(3) ID Number: 547

(4) Check appropriate box(es):

- Candidate Office Sought: Tallahassee City Commission - Seat 4/Mayor
- Political Committee (PC)
- Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded
- Party Executive Committee (PTY) Check here if PTY has disbanded
- Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 24 / 2018 To 11 / 26 / 2018 Report Type: T3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 351 . 68

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 351 . 68

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 3 , 870 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 3 , 870 . 00

(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 Carrie Litherland (2) I.D. Number 547

8/24/2018 through 11/26/2018

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Carrie Litherland

(2) I.D. Number 547

(3) Cover Period 8/24/2018 through 11/26/2018

(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					
9/6/2018 //	Litherland, Suzanne 449 TEAL LANE TALLAHASSEE, FL 32308	reimbursement	RM		\$146.51
1					
11/6/2018 //	Red Cross -Big Bend Chapter, 1115 Easterwood Drive Tallahassee, fl 32311	distribute remaining campaign funds	MO		\$62.02
2					
11/6/2018 //	Legal Aid Foundation of Tallah, 301 S Monroe Street Suite 108 Tallahassee, Fl 32301	distribution of campaign funds	MO		\$62.02
3					
11/6/2018 //	Florida Peer Support Assoc, 449 TEAL LANE TALLAHASSEE, FL 32308	distribute remaining campaign funds	MO		\$62.03
4					
8/31/2018 //	Anedot, Anedot 4017 Buena Vista St. #109 Dallas, Tx 75204	credit card fees	MO		\$19.10
5					
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