CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Cheryl Mae Hudson	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1178610]						
(2) 977 Watersview Drive	Submitted on:						
Address (number and street) Tallahassee, FL 32311	11/1/2018 21:05:18 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: <u>565</u>						
(4) Check appropriate box(es):							
Candidate Office Sought: <u>Piney Z CDD S</u>	Supervisor Seat 3						
Political Committee (PC)  Elections or (ECO)	Charle have if PC as ECO has dishanded						
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	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							
Cover Period: From <u>10</u> / <u>20</u> / <u>2018</u> To	<u>11</u> / <u>1</u> / <u>2018</u> Report Type: <u>G7</u>						
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$ , , <u>170</u> . <u>00</u>	Expenditures \$ , , , 00						
Loans \$,,0.00	Transfers to						
	Office Account \$,,,0.00						
Total Monetary \$ , , 170 . 00							
	Total Monetary \$ , , 0 . 00						
In-Kind \$, <u>335</u> . <u>67</u>							
	(8) Other Distributions						
	\$,, <u>0</u> . <u>00</u>						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$,, <u>170</u> . <u>00</u>	\$,,000						
(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)	(Type name)						
Individual (only for IE Treasurer Deputy Treasurer or electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
X	<u>x</u>						
Signature	Signature						

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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Cheryl Mae Hudson	dson (2) I.D. Number565						
	10/20/2018				11/1/2018			
(3) Cover Peri	od / /	thre	ough	11	(4) Page	e	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10) (1	(11)	11) (12)	
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendment	A second second	
Number 10/22/2018 / /	City, State, Zip Code Hudson, Cheryl Mae 977 Watersview Drive Tallahassee, FL 32311		Occupation engineer	CA CA	Description	Amenument	Amount \$170.0	
10/22/2018 / /	Hudson, Cheryl Mae 977 Watersview Tallahassee, FL 32311	S	engineer	IK	printing and envelopes		\$233.2	
10/22/2018 / /	Hudson, Cheryl Mae 977 Watersview Drive Tallahassee, FL 32311	S	engineer	IK	rubber bands		\$2.4	
3 10/25/2018 / /	Hudson, Cheryl Mae 977 Watersview Drive Tallahassee, FL 32311	S	engineer	IK	payment for delivery of flyer		\$50.C	
4 10/25/2018 / / 5	Hudson, Cheryl Mae 977 Watersview Drive Tallahassee, FL 32311	S	engineer	IK	payment for delivery of flyer		\$50.C	
1 1	_							
1 1	_							
1 1	_							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES (1) Name <u>Cheryl Mae Hudson</u> (2) I.D. Number <u>565</u>						
	10/20/2018 1 /_/through	1/1/2018	4) Page <u>1</u>		0	
(5) Date	(7) Full Name (Last Suffix First Middle)	(8) Purpose	(9)	(10)	(11)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount	
_/ /						
_/ /						
_/ /						
_/_/						
_/ /						
_/ /						
_/ /						
11						

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