

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Dianne Williams-Cox
 Name

(2) 1563 Capital Cir SE 157
 Address (number and street)

Tallahassee, FL 32301
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1251727]

Submitted on:
 11/17/2021 09:50:24 (eastern)

Check here if address has changed (3) ID Number: 632

(4) Check appropriate box(es):

Candidate Office Sought: Tallahassee City Commission - Seat 5

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(5) Report Identifiers

Cover Period: From 10 / 1 / 2021 To 10 / 31 / 2021 Report Type: 21M10

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 \$, , 0 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 0 . 00

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 32 , 535 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 7 , 676 . 25

(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 Dianne Williams-Cox (2) I.D. Number 632
 (3) Cover Period 10/1/2021 through 10/31/2021 (4) Page 1 of 1

(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
(6) Sequence Number							
10/26/2021 / /	UILO, JOE ADDRESS REQUESTED TALLAHASSEE, FL 32301	I	attorney	CH		Delete	\$150.00
1							
10/26/2021 / /	UILO, JOE 2614 LOTUS DRIVE TALLAHASSEE, FL 32312	I	attorney	CH		Add	\$150.00
2							
/ /							
/ /							
/ /							
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/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Dianne Williams-Cox

(2) I.D. Number 632

(3) Cover Period 10/1/2021 through 10/31/2021

(4) Page 1 of 0

(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					
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