	CAMPAIGN TREASURE	R'S REPORT SUMMARY			
(1)	Bill Proctor	OFFICE USE ONLY			
	Name	ONLINE SUBMISSION			
(2)	3109 Wahnish Way	Submitted on:			
	Address (number and street) Tallahassee, FL 32305	7/21/2022 17:26:40 (eastern)			
	City, State, Zip Code				
	Check here if address has changed	(3) ID Number: 655			
(4)	_	(6) 12 (44)			
(4)	Check appropriate box(es): Candidate Office Sought: Leon County C	ommission - District 1			
	Political Committee (PC)	OHMITSSION DISCITED I			
	☐ 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			
Cove	er Period: From $\frac{7}{2}$ / $\frac{2}{2022}$ To	7 / 15 / 2022 Report Type: 22P3			
0	riginal Amendment Spe	ecial Election Report			
(6)	Contributions This Report	(7) Expenditures This Report			
	•	Monetary			
Cash	h & Checks \$, , 0 . 00	Expenditures \$, , 0 . 00			
Loar	ns \$, 0.00 Transfers to				
Luai	, , ,	Office Account \$, , 0 . 00			
Total Monetary \$, , 0.00					
	·	Total Monetary \$, , 0 . 00			
In-Ki	ind \$,,0.00				
		(8) Other Distributions			
		\$,, <u>0</u> . <u>00</u>			
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date			
. ,	\$, 64, 568. 50	\$, <u>35</u> , <u>672</u> . <u>32</u>			
		tification on to falsify a public record (ss. 839.13, F.S.)			
		, , , , , , , , , , , , , , , , , , , ,			
Ιc	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	ill Proctor		(2) I.D. Number 655						
	7/2/202	2		7/15/	2022				
(3) Cover Period	1 1	1	through	1	1	(4) Page	1	of $\frac{1}{}$	

(F)		ſ	(0)	(0)	(4.6)	1 (44)	74: 5 \0
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor 	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
7/15/2022	Morgan, Vanessa A 1345 SW Cardinell Drive Portland, OR 97201	I	tbd	СН		Delete	\$1,000.0
1							
7/15/2022 / /	Morgan, Vanessa A 1345 SW Cardinell Drive Portland, OR 97201	I	retired	СН		Add	\$1,000.0
2							
7/15/2022 / /	Quillin, Robert 1345 SW Cardinell Drive Portland, OR 97201	I	tbd	СН		Delete	\$1,000.0
3							
7/15/2022 / /	Quillin, Robert 1345 SW Cardinell Drive Portland, OR 97201	I	retired	СН		Add	\$1,000.0
4							
1 1							
f f							
J I							
1 1							

Name Bill P Cover Period	7/2/2022 7/ through	15/2022	2) I.D. Numbei I) Page1	-	655 0
(5) Date (6) Sequence Number	(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)	(11)
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