

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Kristin Elizabeth Dozier

Name

(2) PO Box 5651

Address (number and street)

Tallahassee, FL 32314

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 660

OFFICE USE ONLY

ONLINE SUBMISSION

[1283940]

Submitted on:

10/14/2022 06:25:51 (eastern)

(4) Check appropriate box(es):

☒ Candidate Office Sought: Tallahassee City Commission - Seat 4/Mayor

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

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

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 9 / 10 / 2022 To 9 / 23 / 2022 Report Type: 22G3

☐ Original

☒ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$, 1 , 670 . 00

Loans \$, , 0 . 00

Total Monetary \$, 1 , 670 . 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

\$, 174 , 727 . 31

(10) TOTAL Monetary Expenditures To Date

\$, 153 , 933 . 69

(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 Kristin Elizabeth Dozier (2) I.D. Number 660
 9/10/2022 9/23/2022
 (3) Cover Period ____ / ____ / ____ through ____ / ____ / ____ (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						
9/22/2022 / /	Spriggs, Kent 2007 West Randolph Cir Tallahassee, FL 32308	I attorney	CH		Add	\$1,000.00
1						
9/22/2022 / /	Mathis, Richard Reed 1289 Cedar Center Dr Tallahassee, FL 32301	I chiropractor	CH		Add	\$200.00
2						
9/22/2022 / /	Fowler, Patrick J 3001 Tipperary Dr Tallahassee, FL 32309	I retired	CH		Add	\$270.00
3						
9/22/2022 / /	Parsons, Rebecca 1899 Hardaway Hwy Chatahoochie, FL 32324	I marketing & dev	CH		Add	\$200.00
4						
/ /						
/ /						
/ /						
/ /						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Kristin Elizabeth Dozier

(2) I.D. Number 660

(3) Cover Period 9/10/2022 through 9/23/2022

(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
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