	CAMPAIGN TREASURE	ER'S REPORT SUMMARY							
(1)	Susan Elaine Hodges	OFFICE USE ONLY							
*** n	Name	ONLINE SUBMISSION							
(2)	8036 Red Eagle Rd	Submitted on:							
	Address (number and street)	10/31/2022 11:52:04 (eastern)							
	Tallahassee, FL 32312 City, State, Zip Code								
		(0) 10 Ni maham							
/ 4\	Check here if address has changed	(3) ID Number:667							
(4)	Check appropriate box(es):								
		chool Board - District 4							
		☐ 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							
	muvidual making dissisting seminalization,								
	(5) Report	ldentifiers							
Cove	rer Period: From <u>8</u> / <u>6</u> / <u>2022</u> To	8 / 18 / 2022 Report Type: 22P7							
	Original ☐ Amendment ☐ Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
	!	Monetary							
Casl	h & Checks \$, , ,000	Expenditures \$, , 0 . 05							
	ф 0.00								
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$							
Tata	\$ 0.00	Office Account \$, , , 0 . 00							
างเล	al Monetary \$, ,000	Total Monetary \$, 0 . 05							
ام لان	احــ: \$ دـــ:	Total Monetary \$, , 0 . 05							
In-Ki	ind \$,, <u>0</u> .00	(8) Other Distributions							
		\$,,000							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$	\$, <u>2</u> , <u>245</u> . <u>00</u>							
	(11) Certification								
	It is a first degree misdemeanor for any person								
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:							
(Type name) (Type name)									
-	Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
	electioneering comm.)								
Х		X							
	ignature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Susan Elaine Hodges		(2) I.D. Number						
	8/6/2022			/18/2022					
(3) Cover Perio	od//	thro	ough	<i>I I</i>	(4) Page	e <u>1</u>	of		
1000 MB			14400						
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)	_		_					
Sequence Number	Street Address &		ontributor	Contribution	In-kind	Amendment	N		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _S	usan	Elaine	Hodges	1			 (2) I.D. Nun	nber	(567	
		8/6/20	022		8/18/20)22		-			
(3) Cover Pe	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
8/16/2022	Rankin Tacos, 2386 Allen Rd Tallahassee, FL 32312	adjustment to venue fee	MO	Add	\$0.05
1	Tallalassee, FL 32312				
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