

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Sabrina Sheppard  
 Name  
 (2) P. O. Box 1087  
 Address (number and street)  
Chiefland, FL 32644  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1202214]

Submitted on:  
 3/10/2020 23:52:19 (eastern)

Check here if address has changed (3) ID Number: 249

(4) Check appropriate box(es):

Candidate Office Sought: Tax Collector

Political Committee (PC)

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

Cover Period: From 2 / 1 / 2020 To 2 / 29 / 2020 Report Type: M2

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$        ,        , 550 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 550 . 00

In-Kind \$        ,        , 0 . 00

**(7) Expenditures This Report**

Monetary Expenditures \$        ,        , 936 . 96

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 936 . 96

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

**(9) TOTAL Monetary Contributions To Date**  
 \$        ,        , 1 , 750 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$        ,        , 1 , 169 . 85

### (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 Sabrina Sheppard (2) I.D. Number 249

(3) Cover Period 2/1/2020 through 2/29/2020 (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		Type	Occupation				
2/24/2020 / /	BRYANT, LEE 5411 NW 46TH LN CHIEFLAND, FL 32626	I	business owner	CH			\$200.00
1							
2/20/2020 / /	BROOKS, BRENT 12911 NW 92ND ST CHIEFLAND, FL 32626	I	retired	CH			\$250.00
2							
2/20/2020 / /	HARRINGTON , THOMAS D PO BOX 1341 CHIEFLAND, FL 32644	I	real estate	CH			\$100.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Sabrina Sheppard

(2) I.D. Number 249

(3) Cover Period 2/1/2020 / 2/29/2020 through      /      /     

(4) Page 1 of 1

(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					
2/11/2020 / /	THE PRINT SHOP, 224 N MAIN ST CHIEFLAND, FL 32626	100 yard signs 5 4x8 signs	MO		\$881.94
1					
2/11/2020 / /	CHAMBER OF COMMERCE, CHAMBER OF COMM 50 NW MAIN ST WILLISTON, FL 32696	night of a thousand stars	MO		\$30.00
2					
2/12/2020 / /	FFA BANQUET, 351 ISHIE AVE BRONSON , FL 32621	ffa banquet	MO		\$10.00
3					
2/26/2020 / /	MARATHON PETRO , 607 S MAIN CHIEFLAND, FL 32626	gas to put up camp signs	MO		\$15.02
4					
/ /					
/ /					
/ /					
/ /					
/ /					