CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Priscilla Lee Whisenant Trace	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION [1195545]								
(2)	PO Box 416	Submitted on:								
	Address (number and street)	12/5/2019 14:26:36 (eastern)								
	Parrish, FL 34219									
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number:1788								
(4) Check appropriate box(es):										
	 ☐ Candidate Office Sought: COUNTY COMMISSION - DIST. 1 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed 									
	(5) Report	dentifiers								
Cove	er Period: From <u>11</u> / <u>1</u> / <u>2019</u> To									
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , ,000	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , , 000	Total Manatany C								
In-Ki	nd \$,, <u>0</u> .00	Total Monetary \$, , 7 . 95								
		(8) Other Distributions \$, , <u>0</u> 00_								
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc									
(T	(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 Treasurer Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)									
X		x								
Si	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	riscilla Lee Whise	nant Trace		2) I.D. Numbe	er1	788
(3) Cover Period	11/1/2019 I/////	through	1/30/2019 //	(4) Pag	je <u>1</u>	of
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)	(9)	(10)	(11)	(12)
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount
1 1						
1 1						
1 1						
1 1						
f I						
f I						
1 1						
1 1						

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Priscil	la Lee	Whis	enant Trac	е		 (2) I.D. Nur	nber	1	L788	
	1	1/1/2	019		11/30/	2019	*	-			
(3) Cover P	eriod	I	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
11/5/2019	Center State Bank, 12215 US Highway 301 North Parrish, Fl 34219	bank service charge	MO		\$7.95
1				0	
//					
//					
//					
//					
//					
in 8					
//					
DS-DE 14 (Rev	5.	- t-		•	490