

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) TOMMY THOMPSON

Name

(2) \*\* Protected

Address (number and street)

,

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: 405

(4) Check appropriate box(es):

☒ Candidate Office Sought: COUNTY COURT JUDGE - 3

☐ 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

OFFICE USE ONLY  
ONLINE SUBMISSION  
[1151084]

Submitted on:  
3/12/2018 19:38:30 (eastern)

### (5) Report Identifiers

Cover Period: From 2 / 1 / 2018 To 2 / 28 / 2018 Report Type: M2

☒ Original

☐ Amendment

☐ Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 0 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 0 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 243 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 243 . 00

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 500 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 243 . 00

### (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** TOMMY THOMPSON **(2) I.D. Number** 405  
**(3) Cover Period** 2/1/2018 through 2/28/2018 **(4) Page** 1 of 0

(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
/ /							
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# CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name TOMMY THOMPSON

(2) I.D. Number 405

(3) Cover Period 2/1/2018 through 2/28/2018

(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
2/6/2018 / /	Supervisor of Elections, 981 NE 16th Street PO Box 289 Ocala, FL 34478	petitions fee	MO		\$240.00
1					
2/28/2018 / /	Suntrust Bank, PO Box 305183 Nashville, TN 37230	account paper statement fee	MO		\$3.00
2					
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