

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Stanley Thompkins
 Name
 (2) 14452 SW 104 Place
 Address (number and street)
Miami, FL 33176
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1229593]
 Submitted on:
 9/7/2020 18:39:51 (eastern)

Check here if address has changed

(3) ID Number: 2387

(4) Check appropriate box(es):

- Candidate Office Sought: Community Council Area/Subarea 14/141
- 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 6 / 1 / 2020 To 9 / 7 / 2020 Report Type: 20TQC

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 300 . 00

Total Monetary \$, , 300 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 300 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 300 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, , 300 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 300 . 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 Stanley Thompkins (2) I.D. Number 2387

6/1/2020 9/7/2020

(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		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
6/5/2020 / /	Thompkins, Stanley 14452 SW 104 PL Miami, FL 33176	S	financial manager	LO			\$300.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Stanley Thompkins

(2) I.D. Number 2387

(3) Cover Period 6/1/2020 through 9/7/2020

(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					
6/8/2020 / /	Miami-Dade County, 2700 NW 87th Avenue Miami, FL 33172	qualifying fee	MO		\$100.00
1					
9/6/2020 / /	Thompkins, Stanley 14452 SW 104 PL Miami, FL 33176	repay campaign account loan	RM		\$200.00
2					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					