| CAMPAIGN TREASURER'S REPORT SUMMARY | | | | | | | |
|--|---|--|--|--|--|--|--|
| (1) Bobby Highsmith | OFFICE USE ONLY | | | | | | |
| Name | ONLINE SUBMISSION [1156911] | | | | | | |
| (2) 2624 Seidenberg Ave | Submitted on: | | | | | | |
| Address (number and street) Key West, FL 33040 | 6/11/2018 10:50:00 (eastern) | | | | | | |
| City, State, Zip Code | | | | | | | |
| Check here if address has changed | (3) ID Number: 439 | | | | | | |
| (4) Check appropriate box(es): | | | | | | | |
| Candidate Office Sought: School Board | Members, Dist. 1 | | | | | | |
| 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 alacting communications) | ☐ Check here if no other IE or EC reports will be filed | | | | | | |
| individual making electioneering communications) | | | | | | | |
| (5) Report Identifiers | | | | | | | |
| Cover Period: From <u>5</u> / <u>1</u> / <u>2018</u> To | 5/ 31/ 2018 Report Type:M5 | | | | | | |
| ☐ Original ☐ Amendment ☐ Sp | ecial Election Report | | | | | | |
| (6) Contributions This Report | (7) Expenditures This Report | | | | | | |
| | Monetary | | | | | | |
| Cash & Checks \$, , , 00 | Expenditures \$, , , 00 | | | | | | |
| Loans \$,,0.00 | Transfers to | | | | | | |
| | Office Account \$,,0.00 | | | | | | |
| Total Monetary \$,, 0.00 | | | | | | | |
| | Total Monetary \$, , , 0 . 00 | | | | | | |
| In-Kind \$,, <u>150</u> .00 | | | | | | | |
| | (8) Other Distributions | | | | | | |
| | \$,, <u>0</u> . <u>00</u> | | | | | | |
| (9) TOTAL Monetary Contributions To Date | (10) TOTAL Monetary Expenditures To Date | | | | | | |
| \$,, <u>0</u> . <u>00</u> | \$,, <u>0</u> . <u>00</u> | | | | | | |
| (11) | | | | | | | |
| | tification son 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) (Type name) | | | | | | | |
| ☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer or electioneering comm.) | Candidate Chairperson (only for PC and PTY) | | | | | | |
| | | | | | | | |
| <u>X</u> | <u>X</u> | | | | | | |
| Signature | Signature | | | | | | |

DS-DE 12 (Rev. 11/13)

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

| (1) Name <u>Bobby Highsmith</u> (2) I.D. Number | | | | | r4 | 439 | | |
|---|---|------------|--------------------------|----------------------|--------------------------------|------------|---------|--|
| 5/1/2018 | | | | /31/2018 | | | | |
| (3) Cover Perio | od// | thro | | | (4) Page | e <u>1</u> | of | |
| (5) Date | (7) Full Name | (8) | | (9) | (10) | (11) | (12) | |
| (6) Sequence Number | (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | Со Туре | ontributor Occupation | Contribution Type | In-kind Description | Amendment | Amount | |
| 5/1/2018 / / | Highsmith & Van Loon P.A., 3158 Northside Drive Key West, FL 33040 | | law firm | IK | candidate petition cards | | \$150.0 | |
| 1 1 | - | | | | | | | |
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

| (1) Name Bobby | CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES) Name Bobby Highsmith (2) I.D. Number 439 | | | | | |
|---------------------------|--|---|---------------------|-----------|--------|--|
| (3) Cover Period | 5/1/2018 // /through | 5/31/2018 | (4) Page <u>1</u> | of | 0 | |
| (5) Date | (7) Full Name (Last, Suffix, First, Middle) | (8) Purpose (add office sought if | (9) | (10) | (11) | |
| (6) Sequence Number | Street Address & City, State, Zip Code | contribution to a candidate) | Expenditure Type | Amendment | Amount | |
| | | | | | | |
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DS-DE 14 (Rev. 11/13)

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