

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Heather Carruthers  
 Name  
 (2) 1314 Newton St  
 Address (number and street)  
Key West, FL 33040  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1208451]

Submitted on:  
 6/4/2020 16:55:05 (eastern)

Check here if address has changed

(3) ID Number: 507

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner, Dist. 3
- 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 5 / 1 / 2020 To 5 / 31 / 2020 Report Type: M5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 710 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 710 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 100 . 74

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 100 . 74

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 2 , 160 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 256 . 15

### (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 Heather Carruthers (2) I.D. Number 507

(3) Cover Period 5/1/2020 through 5/31/2020 (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
5/6/2020 / /	Schreck, Carol PO Box 4298 Key West, FL 33041	I administrative professional	CH			\$10.00
1						
5/11/2020 / /	Allen, Jon 119 Simonton St Key West, FL 33040	I unemployed	CH			\$200.00
2						
5/18/2020 / /	Allen, Jon 119 Simonton St Key West, FL 33040	I unemployed	CH			\$500.00
3						
/ /						
/ /						
/ /						
/ /						
/ /						
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/ /						

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

(1) Name Heather Carruthers

(2) I.D. Number 507

(3) Cover Period 5/1/2020 through 5/31/2020

(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					
5/12/2020 / / 1	Monroe County Supervisor Of El, 530 Whitehead St Key West, FL 33040	invoice for verifying petitions	MO		\$57.60
5/12/2020 / / 2	Donorbox Corporation, 5 3rd St Suite 900 San Francisco, CA 94103	credit card processing fees	MO		\$21.49
5/28/2020 / / 3	Harland Clarke Corp, 15955 La Cantera Parkway San Antonio, TX 78256	order checks for campaign account	MO		\$21.65
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