CAMPAIGN TREASURER'S REPORT SUMMARY											
(1)	Marcus Chambers	OFFICE USE ONLY									
` '	Name	ONLINE SUBMISSION [1235236]									
(2)	864 Coldwater Creek Circle	Submitted on:									
	Address (number and street)	10/19/2020 19:59:34 (eastern)									
	Niceville, FL 32578										
	City, State, Zip Code										
	Check here if address has changed	(3) ID Number: 632									
(4)	Check appropriate box(es):										
	Candidate Office Sought: Superintenden	t of Schools									
	Political Committee (PC)	Check here if PC or ECO has disbanded									
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PTY has disbanded ☐ Check here if PTY has disbanded									
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed									
	individual making electioneering communications)										
(5) Report Identifiers											
Cove		8 / 13 / 2020 Report Type: P7									
		ecial Election Report									
(6)	Contributions This Report	(7) Expenditures This Report									
Casl	h & Checks \$, , 0 . <u>00</u>	Monetary									
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to									
	Φ 0.00	Office Account \$, , 0 . 00									
Tota	l Monetary \$, ,000	Total Manatania (h. 1906)									
	Φ 0.00	Total Monetary \$, , <u>226</u> . <u>30</u>									
In-Ki	ind \$,, <u>0</u> . <u>00</u>										
		(8) Other Distributions									
		\$, , <u>0</u> . <u>00</u>									
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date									
	\$, <u>127</u> , <u>295</u> . <u>52</u>	\$, <u>124</u> , <u>934</u> . <u>02</u>									
		tification on 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:											
_(T	ype name)	(Type name)									
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)									
Х		×									
	gnature	Signature									

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Marcus Chambers				2) I.D. Numbe	er <u>6</u>	32
	8/1/2020 od///	thro		/13/2020	(A) Pan	1	of ⁰
(o) oover rene			Jogn		(+) 1 ag		
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6)	(Last, Suffix, First, Middle)						
Sequence Number	Street Address & City, State, Zip Code		ontributor Occupation	Contribution	In-kind	Amendment	Amount
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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27 30							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _1	Marcus	Chambe	rs				 (2) I.D. Nun	nber	•	532	3
		8/1/202	20		8/13/20	020					
(3) Cover Po	eriod	1	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
8/4/2020	Office, United States Post 90 Palm Blvd N Niceville, FL 32578	stamps for mailers	МО	Add	\$220.00
8/4/2020	Inc., Stripe 3180 18th St San Francisco, CA 94110	online contribution fees	МО	Add	\$6.30
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DS-DE 14 (Rev					