|             | CAMPAIGN TREASURE   | R'S REPORT SUMMARY   |  |  |  |  |  |  |  |  |
|-------------|---|--|--|--|--|--|--|--|--|--|
| (1)         | Melissa Arnold  | OFFICE USE ONLY  |  |  |  |  |  |  |  |  |
|             | Name  | ONLINE SUBMISSION  |  |  |  |  |  |  |  |  |
| (2)         | PO Box 1494   | Submitted on:  |  |  |  |  |  |  |  |  |
|             | Address (number and street) Okeechobee, FL 34973-1494   | 9/25/2020 14:29:55 (eastern)   |  |  |  |  |  |  |  |  |
| ,           | City, State, Zip Code   | <del></del>  |  |  |  |  |  |  |  |  |
|             | ☐ Check here if address has changed   | (3) ID Number:154  |  |  |  |  |  |  |  |  |
| (4)         | Check appropriate box(es):  | (6)  |  |  |  |  |  |  |  |  |
| (=)         | © Candidate Office Sought: Supervisor of Elections  ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) ☐ Check here if PTY has disbanded ☐ Check here if no other IE or EC reports will be filed |  |  |  |  |  |  |  |  |  |
|             | (5) Report  | Identifiers  |  |  |  |  |  |  |  |  |
| Cove        | er Period: From $9 / 5 / 2020$ To   | 9 / <u>18</u> / <u>2020</u> Report Type: <u>G-3</u>  |  |  |  |  |  |  |  |  |
| X O         | riginal Amendment Spe   | ecial Election Report  |  |  |  |  |  |  |  |  |
| (6)         | Contributions This Report   | (7) Expenditures This Report   |  |  |  |  |  |  |  |  |
| Cash        | n & Checks \$ , , <u>300</u> . <u>00</u>  | Monetary   |  |  |  |  |  |  |  |  |
| Loans \$,,, |   | Transfers to Office Account \$ , , , 0 . 00  |  |  |  |  |  |  |  |  |
|             | Monetary \$,, 300 . 00  | Total Monetary \$ , , , 0 . 00   |  |  |  |  |  |  |  |  |
| In-Ki       | nd \$, <u>446</u> . <u>00</u>   | (0)  |  |  |  |  |  |  |  |  |
|             |   | (8) Other Distributions \$ , , <u>0</u> 00   |  |  |  |  |  |  |  |  |
| (9)         | TOTAL Monetary Contributions To Date  | (10) TOTAL Monetary Expenditures To Date   |  |  |  |  |  |  |  |  |
|             | \$, <u>12</u> , <u>147</u> . <u>13</u>  | \$, <u>4</u> , <u>508</u> . <u>54</u>  |  |  |  |  |  |  |  |  |
|             |   | tification on to falsify a public record (ss. 839.13, F.S.) ect, and complete:  (Type name)  Candidate Chairperson (only for PC and PTY) |  |  |  |  |  |  |  |  |
|             | - · · · · ·   | v  |  |  |  |  |  |  |  |  |
| Sid         | gnature   | X<br>Signature   |  |  |  |  |  |  |  |  |

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

| (1) Name        | Melissa Arnolo | 1 |         |       | (2   | ) I.D. Number _ |   | 154 |   |  |
|-----------------|----------------|---|---------|-------|------|-----------------|---|-----|---|--|
|                 | 9/5/2020       |   |         | 9/18/ | 2020 |                 |   |     |   |  |
| (3) Cover Perio | od /           | 1 | through | 1     | 1    | (4) Page        | 1 | of  | 1 |  |

| (5) Date (6)       | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8)  |  | (9)<br>Contribution | (10)                        | (11)      | (12)    |
|--------------------|--|------|--|---------------------|-----------------------------|-----------|---------|
| Sequence<br>Number |  | Туре | A MATERIAL PROPERTY AND A STATE OF THE STATE | Type                | In-kind<br>Description      | Amendment | Amount  |
| 9/5/2020<br>/      | Arnold, Melissa<br>P.O. Box 1494<br>Okeechobee, FL 34973                           | S    |  | IK                  | golf cart                   |           | \$75.(  |
| 9/5/2020           | Arnold, Melissa<br>P.O. Box 1494<br>Okeechobee, FL 34973                           | S    | self-employed  | ) IK                | promotiona<br>l<br>material |           | \$115.( |
| 9/16/2020          | Ludlum, Bonnie<br>2918 SE 27th Street<br>Okeechobee, FL 34974                      | I    | retired  | СН                  |                             |           | \$300.1 |
| 9/16/2020          | Arnold, Melissa<br>PO Box 1494<br>Okeechobee, FL 34973                             | S    |  | IK                  | postage                     |           | \$67.   |
| 9/18/2020<br>/ /   | Arnold, Melissa<br>P.O. Box 1494<br>Okeechobee, FL 34973                           | S    | self-employed  | ) IK                | ad                          |           | \$189.  |
| l l                |  |      |  |                     |                             |           |         |
| 1 1                |  |      |  |                     |                             |           |         |
| 1 1                |  |      |  |                     |                             |           |         |

| 1) Name <u>Meliss</u>         | a Arnold   |                                 |   | ED EXPENDITURES (2) I.D. Number |      |                |  |  |
|-------------------------------|--|---------------------------------|---|---------------------------------|------|----------------|--|--|
| 3) Cover Period _             | 9/5/2020   | 9 /<br>through                  | 18/2020<br>_///   | (4) Page1                       | of _ | 0              |  |  |
| (5) Date  (6) Sequence Number | (7)<br>Full Na<br>(Last, Suffix, F<br>Street Add<br>City, State, | ame<br>irst, Middle)<br>dress & | (8) Purpose (add office sought contribution to a candidate) |                                 | (10) | (11)<br>Amount |  |  |
| //                            |  |                                 |   |                                 |      |                |  |  |
| //                            |  |                                 |   |                                 |      |                |  |  |
| //                            |  |                                 |   |                                 |      |                |  |  |
| //                            |  |                                 |   |                                 |      |                |  |  |
| //                            |  |                                 |   |                                 |      |                |  |  |
| //                            |  |                                 |   |                                 |      |                |  |  |
| //                            |  |                                 |   |                                 |      |                |  |  |