

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Melissa Arnold  
 Name  
 (2) PO Box 1494  
 Address (number and street)  
Okeechobee, FL 34973-1494  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1195269]

Submitted on:  
 12/2/2019 14:31:07 (eastern)

Check here if address has changed (3) ID Number: 154

(4) Check appropriate box(es):

Candidate Office Sought: Supervisor of Elections

Political Committee (PC)  Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO)  Check here if PTY has disbanded

Party Executive Committee (PTY)  Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

### (5) Report Identifiers

Cover Period: From 11 / 1 / 2019 To 11 / 30 / 2019 Report Type: M-11

Original  Amendment  Special Election Report

**(6) Contributions This Report**

Cash & Checks \$      ,      , 50 . 00

Loans \$      , 4 , 100 . 00

Total Monetary \$      , 4 , 150 . 00

In-Kind \$      ,      , 71 . 94

**(7) Expenditures This Report**

Monetary Expenditures \$      ,      , 0 . 00

Transfers to Office Account \$      ,      , 0 . 00

Total Monetary \$      ,      , 0 . 00

**(8) Other Distributions**  
 \$      ,      , 0 . 00

**(9) TOTAL Monetary Contributions To Date**  
 \$      , 10 , 040 . 00

**(10) TOTAL Monetary Expenditures To Date**  
 \$      ,      , 25 . 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     Melissa Arnold     (2) I.D. Number     154      
 11/1/2019 through 11/30/2019  
 (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 Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
11/14/2019 / /	Pate, Joel C. 3618 Earlston Road Graceville, FL 32440	I		CH			\$50.00
1							
11/15/2019 / /	Arnold, Melissa P.O. Box 1494 Okeechobee, FL 34973	S	self-emplo yed	IK	entry for christmas parade		\$10.00
2							
11/17/2019 / /	Arnold, Melissa P. O. Box 1494 Okeechobee, FL 34973	S	self-emplo yed	IK	christmas lights for parade		\$17.72
3							
11/17/2019 / /	Arnold, Melissa P.O. Box 1494 Okeechobee, FL 34973	S	self-emplo yed	IK	decorations for christmas parade		\$44.22
4							
11/24/2019 / /	Arnold, Melissa P.O. Box 1494 Okeechobee, FL 34973	S	self-emplo yed	LO			\$4,100.00
5							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Melissa Arnold

(2) I.D. Number 154

(3) Cover Period 11/1/2019 through 11/30/2019

(4) Page 1 of 0

(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					
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