

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Faith Nielson
 Name
 (2) 5250 NE 122nd Dr
 Address (number and street)
Okeechobee, FL 34972
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1239543]

Submitted on:
 11/16/2020 19:12:58 (eastern)

Check here if address has changed

(3) ID Number: 156

(4) Check appropriate box(es):

- Candidate Office Sought: Supervisor of Elections
- 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 4 / 1 / 2020 To 4 / 30 / 2020 Report Type: M-4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, -1 , 390 . 18

Loans \$, , 0 . 00

Total Monetary \$, -1 , 390 . 18

In-Kind \$, 1 , 390 . 18

(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

\$, 1 , 200 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 1 , 050 . 83

(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 Faith Nielson (2) I.D. Number 156
 (3) Cover Period 4/1/2020 through 4/30/2020 (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 |
|---------------------------|--|---------------------------------------|-----------------------------|---|-------------------|----------------|
| (6) Sequence Number | | | | | | |
| 4/8/2020 / / | Nielson, Faith 5250 N. E. 122Nd Dr Okeechobee, FL 34972 | S deputy soe | CH | signs & hats | Delete | \$898.75 |
| 1 | | | | | | |
| 4/8/2020 / / | Nielson, Faith 5250 N. E. 122Nd Dr Okeechobee, FL 34972 | S deputy soe | IK | signs & hats | Add | \$898.75 |
| 2 | | | | | | |
| 4/13/2020 / / | Nielson, Faith 5250 N. E. 122Nd Dr Okeechobee, FL 34972 | S | CH | candidate petition verificati on | Delete | \$21.70 |
| 3 | | | | | | |
| 4/13/2020 / / | Nielson, Faith 5250 N. E. 122Nd Dr Okeechobee, FL 34972 | S | IK | candidate petition verificati on | Add | \$21.70 |
| 4 | | | | | | |
| 4/24/2020 / / | Nielson, Faith 5250 N. E. 122Nd Dr Okeechobee, FL 34972 | S deputy soe | CH | signs | Delete | \$469.73 |
| 5 | | | | | | |
| 4/24/2020 / / | Nielson, Faith 5250 N. E. 122Nd Dr Okeechobee, FL 34972 | S deputy soe | IK | signs | Add | \$469.73 |
| 6 | | | | | | |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Faith Nielson

(2) I.D. Number 156

(3) Cover Period 4/1/2020 through 4/30/2020

(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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