CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Donna Howard	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	1804 SW 2nd Ave	Submitted on:							
	Address (number and street) Okeechobee, FL 34974	3/8/2020 12:52:59 (eastern)							
	City, State, Zip Code	<del></del>							
	Check here if address has changed	(3) ID Number: 167							
(4)	Check appropriate box(es):								
( -/	☐ Candidate Office Sought: Supervisor of	Elections							
	Political Committee (PC)								
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY) ☐	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded							
		☐ Check here if no other IE or EC reports will be filed							
	individual making electioneering communications)	-							
(5) Report Identifiers									
Cove		2 / 29 / 2020 Report Type: M-2							
		ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
(0)	Communications (mis respect	Monetary							
Cash	n & Checks \$ , , 0 . 00	Expenditures \$ , , 0 . 00							
Loar	s , , , 0 . <u>00</u>	Transfers to Office Account \$							
Tota	I Monetary \$ , , 0 . 00	Office Account \$ , , , 0 . 00							
Tota	,,,,	Total Monetary \$ , 0 . 00							
In-Ki	ind \$,, 45.00	, , ,							
		(8) Other Distributions							
		\$ , , <u>0</u> . <u>00</u>							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$,, <u>0</u> . <u>00</u>	\$ , , <u>0</u> . <u>00</u>							
(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) (Type name)									
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)							
х		X							
	gnature	Signature							

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

(1) Name	Donna Howard	(2) I.D. Number <sub>167</sub>						
2/1/2020			2/29/2020					
(3) Cover Peri	od / /	thro	ough	11_	(4) Pag	e <sup>1</sup>	of <sup>1</sup>	
W			1440			,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(5)	(7)		(8)	(9)	(10)	(11)	(12)	
Date	Full Name			Cas			€036- <b>3</b> V	
(6)	(Last, Suffix, First, Middle)							
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
	Howard, Donna V	S		IK	petition		\$45.0	
2/24/2020	1804 SW 2nd Avenue				cards/prin ting costs			
, t	Okeechobee, FL 34974				ting costs			
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(1) Name Donna	CAMPAIGN TREASURER'S RE		EXPENDIT 2) I.D. Number		167
	2/1/2020 2/2 /through	9/2020	) Page <u>1</u>		0
(5) Date (6) Sequence Number	(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)	(11)
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