CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Roberta Walton Johnson	OFFICE USE ONLY							
•	Name	ONLINE SUBMISSION							
(2)	PO Box 585251	Submitted on:							
	Address (number and street)	11/21/2022 15:53:37 (eastern)							
	Orlando, FL 32858  City, State, Zip Code								
	_	(2) ID Marianham 1101							
- 45	Check here if address has changed	(3) ID Number:1121							
(4)	Check appropriate box(es):								
	<ul><li></li></ul>	sioner 6							
	☐ 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	dentifiers							
Cove	er Period: From $\underline{6}$ / $\underline{18}$ / $\underline{2022}$ To	7 / 1 / 2022 Report Type: P2							
□ 0	original Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
		Monetary							
Cash	h & Checks \$ , , 0 . 00	Expenditures \$ , , 0 . 00							
er	Φ 0.00								
Loar	ns \$,, <u>0</u> .00	Transfers to Office Account \$							
Tato	\$ 0.00	Office Account \$ , , , 0 . 00							
างเล	Il Monetary \$ , , , 0 . 00	Total Monetary \$ . 0 . 00							
In-Ki	ind \$ , , 0.00	Total Monetary \$ , , 0 . 00							
111-171	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions							
		\$,,000_							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>58</u> , <u>391</u> . <u>75</u>	\$, _36_, _37404							
	(11) Cert	tification							
	It is a first degree misdemeanor for any pers								
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)							
	electioneering comm.)								
Х		×							
	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Roberta Walton Johnson (2) I.D. Number 1121							
	6/18/2022		7	/1/2022			
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Pag	e	of
4							
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)	_					
Sequence	Street Address &		ontributor	Contribution	In-kind	Amendance	
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
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## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name	berta	Walto	n Joh	nson			 (2) I.D. Nun	nber	-	1121	-
	6	/18/20	022		7/1/202	2	~ ~	-			
(3) Cover Peri	iod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
6/23/2022	Staples, Individual 3065 Daniels Rd Winter Garden, FL 34787	supplies	МО	Delete	\$26.61
1					
6/23/2022	Staples, Inc., 3065 Daniels Rd Winter Garden, FL 34787	supplies	МО	Add	\$26.61
2					
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_//					
7				3	2
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DS-DE 14 (Rev.	44/42 \$				