	CAMPAIGN TREASURE	CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Nicole Wilson	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	1807 Glenbay Ct	Submitted on:								
	Address (number and street)	7/13/2020 12:19:53 (eastern)								
	Windermere, FL 34786 City, State, Zip Code									
	_	(2) ID Niverbarr 173								
/ 4\	Check here if address has changed	(3) ID Number:173								
(4)	Check appropriate box(es):									
		sioner I								
		☐ Check here if PC or ECO has disbanded								
		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								
	maining dissillating section in general manner in the mann									
	(5) Report	Identifiers								
Cove	er Period: From <u>6</u> / <u>27</u> / <u>2020</u> To	7 / 10 / 2020 Report Type: P3								
X O	Original Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
		Monetary								
Cash	h & Checks \$,1 , <u>025</u> . <u>00</u>	Expenditures \$, , 0 . 00								
707	1									
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$								
Tata	Il Monetary \$, 1 , 025 . 00	Office Account \$, , , 0 . 00								
TOla	Il Monetary \$,1 , <u>025</u> . <u>00</u>	Total Monetary \$. 0 . 00								
In-Ki	ind \$, , 240 . 00	Total Monetary \$, , 0 . 00								
III-iXi	, , , , , , , , , , , , , , , , , , ,	(8) Other Distributions								
		\$,,								
		· / /								
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date								
	\$,8,0000	\$, <u>6</u> , <u>886</u> . <u>93</u>								
	(11) Cert	ification								
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:										
(T	ype name)	(Type name)								
-	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)								
	electioneering comm.)									
Х		X								
	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Nicole Wilso	n			_ (2	?) I.D. Number			
	6/27/202	20		7/10/2	020				
(3) Cover Perio	d /	1	through	1	1	(A) Page	1	of	2

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)			_			
Sequence	Street Address &	800	ontributor	Contribution	In-kind	10 1 10 10 10 10 10 10 10 10 10 10 10 10 10	~~~~~
Number	City, State, Zip Code	Туре		Туре	Description	Amendment	Amount
7/5/2020 / /	Simonetta, Ed 9520 Lake Hugh Drive Gotha, FL 34734	I	cpa	СН			\$250.0
1							
7/5/2020 / /	Giese, Jill 8268 Limetree Court Orlando, FL 32836	I	retired	СН			\$50.0
2							
7/5/2020 / /	Sanders , Morgan 6524 Helmsley Cir Windermere, FL 34786	I	photograph er	n CH			\$25.0
3		_		GT.			****
7/3/2020	Rawlins, Pamela 12707 Water Point Blvd Windermere, FL 34786	I	executive producer	СН			\$100.0
4	Evans, Melissa	I	administra	CU			\$50.0
7/3/2020	***Protected Voter***	1	tor	Cn			\$30.0
7/9/2020	Shadix, Katrina PO Box 622621 Oviedo, FL 32762	I	non profit director	CH			\$100.0
6							
7/9/2020	Rochon, Dee 3145 Avalon Rd Winter Garden, FL 34787	I	teacher	СН			\$100.0
7							
7/9/2020	Erwin, Joan 116 Fernwood St Orlando, FL 32806	I	retired	СН			\$150.0
8							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

	Nicole Wils	son			(2	?) I.D. Number	173		
	6/27/2	020		7/10/	2020				
(3) Cover Perio	nd /	1	through	1	1	(A) Page	2	of	2

(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
7/9/2020	McLaughlin, Penny 1125 Delaney Ave Orlando, FL 32806	Î	ocps paraprofes sional	CH THE	24		\$100.0
7/9/2020	Bramuchi, Christine ***Protected Voter***	e I	nonprofit	СН			\$100.0
7/10/2020 / /	Wilson, Nicole 1807 Glenbay Court Windermere, FL 34786	S	attorney	IK	sign stakes, printing.		\$240.0
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/ /							

(1) Name Nico	CAMPAIGN TREASURER'S RE	(2	EXPENDIT 2) I.D. Number		173
(3) Cover Period	6/27/2020 7/10 /through)/2020 //(4	1) Page1	of _	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) Amount
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2 5 3 2 7 8					