

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Alaina Shaleen Slife
 Name
 (2) 5526 Parkdale Dr
 Address (number and street)
Orlando, FL 32839
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1223517]

Submitted on:
 8/7/2020 07:50:27 (eastern)

Check here if address has changed

(3) ID Number: 192

(4) Check appropriate box(es):

- Candidate Office Sought: Soil & Water Conservation Dist. Supervisor Seat 5
- 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 6 / 13 / 2020 To 6 / 26 / 2020 Report Type: P2

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 70 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 70 . 00

In-Kind \$, , 0 . 00

(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

\$, , 95 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 46 . 72

(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 Alaina Shaleen Slife (2) I.D. Number 192
 6/13/2020 through 6/26/2020
 (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	Amendment	Amount
6/20/2020 / /	Paterson, Shakiyla 3817 Kennedy Circle Cocoa, FL 32926	I		CH	donation to gofundme	Add	\$5.00
1							
6/23/2020 / /	Gaid, Amanda 1808 Seton Hall Way Lake Mary, FL 32746	I		CH	donation to gofundme	Add	\$25.00
2							
6/24/2020 / /	Schwartz, Steve PO Box 677549 Orlando, FL 32867	I		CH	donation to gofundme	Add	\$10.00
3							
6/24/2020 / /	Garcia-Luckey, Erin 4344 Ilene Court Orlando, FL 32806	I		CH	donation to gofundme	Add	\$10.00
4							
6/24/2020 / /	Christian, Bethany 410 Parson Brown Way Longwood , FL 32750	I		CH	donation to gofundme	Add	\$20.00
5							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Alaina Shaleen Slife

(2) I.D. Number 192

(3) Cover Period 6/13/2020 through 6/26/2020

(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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