

## 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**  
 [1227784]  
 Submitted on:  
 8/26/2020 17:18:16 (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 / 27 / 2020 To 7 / 10 / 2020 Report Type: P3

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 500 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 500 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 23 . 94

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 23 . 94

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 720 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 216 . 86

### (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  
 (3) Cover Period 6/27/2020 through 7/10/2020 (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
7/5/2020 / /	Wornick, Michelle 1305 Page Ave Orlando, FL 32806	O	nanny	CH		Add	\$250.00
1							
7/6/2020 / /	Slife, Albert T 2019 Strathaven Road Winter Park, FL 32792	O	retired	CH		Add	\$200.00
2							
7/6/2020 / /	McCullough, Sheri 142 Pine Isle Dr Sanford, FL 32773	O		CH		Add	\$50.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Alaina Shaleen Slife

(2) I.D. Number 192

(3) Cover Period 6/27/2020 through 7/10/2020

(4) Page 1 of 1

(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					
7/7/2020 / /	, GoFundMe 855 Jefferson Ave Redwood City, CA 94063	charge for service	RE	Add	\$7.55
1					
7/7/2020 / /	, GoFundMe 855 Jefferson Ave Redwood City, CA 94063	charge for service	RE	Add	\$7.51
2					
7/7/2020 / /	, GoFundMe 855 Jefferson Ave Redwood City, CA 94063	charge for service	RE	Add	\$1.03
3					
7/8/2020 / /	, GoFundMe 855 Jefferson Ave Redwood City, CA 94063	charge for service	RE	Add	\$7.85
4					
/ /					
/ /					
/ /					
/ /					