

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Michael Scott
 Name

(2) P.O. Box 581133
 Address (number and street)

Orlando, FL 32858
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1215283]

Submitted on:
 7/6/2020 00:35:02 (eastern)

Check here if address has changed (3) ID Number: 203

(4) Check appropriate box(es):

Candidate Office Sought: School Board Dist. 5

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

Independent Expenditure (IE) (also covers an individual making electioneering communications)

(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 \$, 1 , 075 . 00

Loans \$, , 0 . 00

Total Monetary \$, 1 , 075 . 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
 \$, 3 , 075 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 1 , 600 . 00

(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 Michael Scott (2) I.D. Number 203
 6/13/2020 through 6/26/2020
 (3) Cover Period / / through / / (4) Page 1 of 2

(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						
6/18/2020 / /	Eskamani, Anna 1507 E Concord Street Orlando, FL 32803	I state representative	CH			\$100.00
1						
6/18/2020 / /	Wheeler, Jarvis 5768 South Semoran Blvd Orlando, FL 32822	I education director	CH			\$100.00
2						
6/26/2020 / /	Quarterman, Tony 5320 N Pine Hills Road Orlando, FL 32808	I salon owner	CH			\$100.00
3						
6/26/2020 / /	Synmoie, Sean 715 N Fern Creek Ave Orlando, FL 32803	I	CH			\$20.00
4						
6/26/2020 / /	Preston, Paige 715 N Fern Creek Ave Orlando, FL 32803	I restaurant server	CH			\$45.00
5						
6/24/2020 / /	Mosley, Jovon 3880 Foliage Drive Winston Salem, NC 27101	I sensory scientist	CH			\$100.00
6						
6/24/2020 / /	Jonson, Dauhn PO Box 11 Goldenrod, FL 32733	I utilities worker	CH			\$50.00
7						
6/24/2020 / /	Mosley, Jovon 3880 Foliage Drive Winston Salem, NC 27101	I sensory scientist	CH			\$100.00
8						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Michael Scott (2) I.D. Number 203
 6/13/2020 through 6/26/2020
 (3) Cover Period / / through / / (4) Page 2 of 2

(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						
6/13/2020 / /	Segura , Pamela 300 W Veterans Blvd Big Spring, TX 79720	I counselor lmhc	CH			\$20.00
9						
6/25/2020 / /	Adamson, Alisha 1820 W Colonial Drive Orlando, FL 32804	I attorney	CH			\$200.00
10						
6/24/2020 / /	Hinton, Shay 4708 Walden Circle Orlando, FL 32811	I restaurant owner	CH			\$100.00
11						
6/23/2020 / /	Bell, Dangelo F.S. 119.071 Exempt Orlando, FL 32801	I deputy sheriff	CH			\$100.00
12						
6/26/2020 / /	Truss, Fred 2903 E Colonial Drive Orlando, FL 32803	I restaurant manager	CH			\$10.00
13						
6/26/2020 / /	Lee, Garrett 933 Bethune Drive Orlando, FL 32805	I pastry chef	CH			\$30.00
14						
/ /						
/ /						

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Michael Scott

(2) I.D. Number 203

(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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