CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	James M. Washington	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION [1291782]							
(2)	PO Box 2277	Submitted on:							
	Address (number and street)	2/3/2023 08:10:57 (eastern)							
	Saint Leo, FL 33574  City, State, Zip Code								
	_	(0) ID N							
	Check here if address has changed	(3) ID Number:1442							
(4)	Check appropriate box(es):								
	Candidate Office Sought: School Board	Member District 1							
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ 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							
	individual making electioneering communications)								
	(5) Report	Identifiers							
Cove	er Period: From 6 / 1 / 2022 To	6 / 17 / 2022 Report Type: P1							
	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$ , , , 000	Monetary							
Loar	s , , , ,	Transfers to Office Account \$ , , 0 . 00							
Tota	I Monetary \$ , , , 000								
In-Ki	ind \$ , , 0.00	Total Monetary \$ , , , 97							
III-IXI	,,,,	(8) Other Distributions							
		\$ , , 000							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
	\$, <u>19</u> , <u>902</u> . <u>00</u>	\$ , <u>14</u> , <u>122</u> . <u>88</u>							
	(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:									
(T	ype name)	(Type name)							
	Individual (only for IE  Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)							
X		X							
Si	gnature	Signature							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number1442								
	6/1/2022 od///		6	/17/2022 //	(4) Pag	e <u>1</u>	of	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code		(8)  ontributor  Occupation	(9)	(10)	(11)	(12) Amount	
/ /	Oity, State, Zip Code	Туре	Occupation	Туре	Description	Allerdirent	Amount	
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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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

(1) Name <u>Ja</u>	mes I	М.	Wash:	ington					(2) I.D. Nun	nber		1442	
		6/	1/202	2		6/17/	2022						
(3) Cover Per	iod		1	1	through	1		(	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(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
6/7/2022	Harland Checks, 15955 La Cantera Pkwy San Antonio, TX 78256	purchase checks	MO	Add	\$77.97
1	San Antonio, 1X 78256				
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