CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	MaryEllen Crowder	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	3417 Tanglewood Trail	Submitted on:								
	Address (number and street) Palm Harbor, FL 34685	12/17/2020 15:37:23 (eastern)								
	City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 1004								
(4)	Check appropriate box(es):									
	 ☑ Candidate Office Sought: East Lake Tarpon Spec. Fire Cont. Dist Seat 3 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ 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								
Cove	er Period: From 10 / 30 / 2020 To									
X O	riginal Amendment Spe	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , 0 . <u>00</u>	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
	I Monetary \$,,,	Total Monetary \$, , <u>86</u> . <u>81</u>								
In-Ki	find \$									
		(8) Other Distributions \$, , 000_								
(9)	(9) TOTAL Monetary Contributions To Date \$\(\text{\begin{subarray}{cccccccccccccccccccccccccccccccccccc									
(T	(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 Treasurer Deputy Treasurer Candidate Chairperson (only for PC and PTY)									
<u>X</u>		X Sign at use								
51	gnature	Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	MaryEllen Crowder	(2) I.D. Number							
	10/30/2020			/1/2021					
(3) Cover Perio	od / /	thro	ough	<i>I I</i>	(4) Page	a <u>1</u>	of		
				r					
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name								
(6)	(Last, Suffix, First, Middle)	_			Local Process				
Sequence Number	Street Address &		ontributor Occupation	Contribution	In-kind	Amendment	Amount		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _M	MaryEllen	Crov	wder				 (2) I.D. Nun	nber	1	1004	300
	10/	30/2	020		2/1/202	1					
(3) Cover Pe	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
12/17/2020	Crowder, Maryellen 3417 Tanglewood Trail Palm Harbor, Fl 34685	balance of the loan of \$100.00 that i contributed	RM		\$86.81
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DS-DE 14 (Rev.					