	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Tom Topping	OFFICE USE ONLY						
` '	Name	ONLINE SUBMISSION						
(2)	2980 Haines Bayshore Road #160	Submitted on:						
	Address (number and street)	6/9/2020 21:23:04 (eastern)						
	Clearwater, FL 33760							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:1017						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: School Board	Member - District 1 - At Large						
	Political Committee (PC)							
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
		☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	dentifiers						
Cove		5 / 31 / 2020 Report Type: M5						
XI O		ecial Election Report						
		<u> </u>						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$, , 97.00		Monetary Expenditures \$, , 0 . 00						
Odsi	T & OTICONS	, , , , , , , , , , , , , , , , , , ,						
Loar	ns \$, , 0.00	Transfers to						
		Office Account \$, , 0 . 00						
Tota	I Monetary \$, , 97.00							
	 	Total Monetary \$, , 0 . 00						
In-Ki	nd \$,,, _000							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,, 97.00	\$, , 0.00						
	(11) Cert It is a first degree misdemeanor for any pers							
I certify that I have examined this report and it is true, correct, and complete:								
(T <u>y</u>	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Tom Topping			(2) I.D. Number ₁₀₁₇			
5/1/2020		5/31/2020					
(3) Cover Peri	iod / /	throug	gh	11_	(4) Pag	e <u>1</u>	of ¹
2004. Au					90 (0) 907107		
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ributor	Contribution	In-kind		
Number	City, State, Zip Code		Occupation	Туре	Description	Amendment	Amount
5/29/2020	Topping, Tom		eaker/tr				\$97.0
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	Clearwater, FL 33760						
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(1) Name <u>Tom</u>	CAMPAIGN TREASURER'S Topping			EXPENDITURES) I.D. Number		
	5/1/2020 d/through	5/31/2020	(4) Page1		0	
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought contribution to a candidate)	if Expenditure Type	(10)	(11)	
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