

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Tom Topping
 Name
 (2) 2980 Haines Bayshore Road #160
 Address (number and street)
Clearwater, FL 33760
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1239998]
 Submitted on:
 11/23/2020 10:18:44 (eastern)

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) 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 8 / 14 / 2020 To 11 / 16 / 2020 Report Type: TRP
 Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00
 Loans \$, , 0 . 00
 Total Monetary \$, , 0 . 00
 In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 0 . 50
 Transfers to Office Account \$, , 0 . 00
 Total Monetary \$, , 0 . 50

(8) Other Distributions
 \$, , 0 . 00

(9) TOTAL Monetary Contributions To Date
 \$, 14 , 668 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 14 , 935 . 80

(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 Tom Topping (2) I.D. Number 1017

8/14/2020 through 11/16/2020

(3) Cover Period ___ / ___ / ___ through ___ / ___ / ___ (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Tom Topping

(2) I.D. Number 1017

(3) Cover Period 8/14/2020 through 11/16/2020

(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					
8/19/2020 //	Anedot, 1340 Poydras Street Suite1770 New Orleans, LA 70112	donation management fee	MO	Add	\$0.50
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