CAMPAIGN TREASURER'S REPORT SUMMARY						
(1)	Elizabeth Libby Morris	OFFICE USE ONLY				
•	Name	ONLINE SUBMISSION				
(2)	PO Box 1816	Submitted on:				
	Address (number and street)	3/5/2020 13:49:06 (eastern)				
	Palatka, FL 32178 City, State, Zip Code	<u> </u>				
		(0) ID Nissaham 222				
<i>(</i> 4)	Check here if address has changed	(3) ID Number:				
(4)	Check appropriate box(es):					
		Grp 2				
		☐ 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				
Cove	er Period: From $2 / 1 / 2020$ To	2 / 29 / 2020 Report Type: <u>M2</u>				
X o	original Amendment Spe	ecial Election Report				
(6)	Contributions This Report	(7) Expenditures This Report				
		Monetary				
Cash	h & Checks \$, , ,000	Expenditures \$, , 0 . 00				
	s \$, , 0.00	- Carlo				
Loar	ns \$,, <u>0</u> . <u>00</u>	Transfers to Office Account \$				
Tota	I Monetary \$, , 0 . 00	Office Account \$, , , 0 . 00				
1014	, , , , ,	Total Monetary \$, , 0 . 00				
In-Ki	ind \$, , 23 . 70	, , , , , , , , , , , , , , , , , , ,				
		(8) Other Distributions				
		\$,,, <u>0</u> . <u>00</u>				
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date				
(5)	\$, , , 0 . 00	\$, , 000_				
	, <u> </u>	,,,				
	(11) Cert					
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:						
	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	Elizabeth Libby Morris				(2) I.D. Number			
	2/1/2020			/29/2020				
(3) Cover Perio	od//	thro	ough	11_	(4) Page	e <u>1</u>	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)	
Sequence Number	Street Address & City, State, Zip Code		ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
2/27/2020	Morris, Elizabeth Anne PO Box 1816 Palatka, FL 32178	S	county judge	IK	personal check written to supervisor of elections		\$23.7	
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DS-DE 13 (Rev. 11/1	3)	SEE RE	VERSE FOR I	NSTRUCTIONS	AND CODE VAL	UES		

(1) Name	Elizabeth Libby Morris	:D EXPENDITU (2) I.D. Number	RES 333		
(3) Cover		/29/2020 	(4) Page1	of	0
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)

(5) Date	(7) Full Name	Purpose	(9)	(10)	(1.1)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
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