

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Donna Maria Mills  
 Name  
 (2) PO Box 311  
 Address (number and street)  
Fort Pierce, FL 34954  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1153505]

Submitted on:  
 5/6/2018 01:58:20 (eastern)

Check here if address has changed

(3) ID Number: 358

(4) Check appropriate box(es):

- Candidate Office Sought: School Board, District 3
- 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 4 / 1 / 2018 To 4 / 30 / 2018 Report Type: M4

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$        ,        , 375 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 375 . 00

In-Kind \$        ,        , 0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 45 . 63

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 45 . 63

### (8) Other Distributions

\$        ,        , 0 . 00

### (9) TOTAL Monetary Contributions To Date

\$        ,        , 6 , 075 . 00

### (10) TOTAL Monetary Expenditures To Date

\$        ,        , 329 . 01

### (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 Donna Maria Mills (2) I.D. Number 358  
 4/1/2018 through 4/30/2018  
 (3) Cover Period      /      /      through      /      /      (4) Page 1 of 1

(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
(6) Sequence Number		Type	Occupation				
4/29/2018 / /	Simmons, Evett 7843 Sabal Lake Drive Port St. Lucie, Fl 34986	I	attorney	CH			\$250.00
1							
4/29/2018 / /	Hilson, Carol 3003 SE Galt Circle Port St. Lucie, Fl 23984	I	childcare director	CH			\$100.00
2							
4/30/2018 / /	Handy, Cheryl 8650 Pine Martin Lane Fort Pierce, Fl 34947	I		CH			\$25.00
3							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Donna Maria Mills

(2) I.D. Number 358

(3) Cover Period 4/1/2018 through 4/30/2018

(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					
4/29/2018 //	Walmart, 1675 Saint. Lucie West Blvd Port St Lucie, Fl 34986	supplies for self fund raising event	MO		\$45.63
1					
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