

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Donna Mills  
Name

(2) 1330 SW Briarwood Drive  
Address (number and street)

Port St. Lucie, FL 34986  
City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
[1262449]

Submitted on:  
6/3/2022 22:17:25 (eastern)

Check here if address has changed

(3) ID Number: 515

(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 5 / 1 / 2022 To 5 / 31 / 2022 Report Type: M5

Original  Amendment  Special Election Report

### (6) Contributions This Report

Cash & Checks \$      ,   1   , 850 . 00

Loans \$      ,      ,   0 . 00

Total Monetary \$      ,   1   , 850 . 00

In-Kind \$      ,      ,   0 . 00

### (7) Expenditures This Report

Monetary Expenditures \$      ,      ,   0 . 00

Transfers to Office Account \$      ,      ,   0 . 00

Total Monetary \$      ,      ,   0 . 00

### (8) Other Distributions

\$      ,      ,   0 . 00

### (9) TOTAL Monetary Contributions To Date

\$      ,   9   , 150 . 00

### (10) TOTAL Monetary Expenditures To Date

\$      ,      , 633 . 31

### (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 Mills (2) I.D. Number 515  
 (3) Cover Period 5/1/2022 through 5/31/2022 (4) Page 1 of 2

(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	Type	Description	Amendment	Amount
5/6/2022 / /	Woulard, Latricia 6575 44th Lane Vero Beach, FL 32967	I		CH			\$100.00
1							
5/8/2022 / /	Parry, John 2203 South Indian River Dr. Fort Pierce, FL 34950	I		CH			\$100.00
2							
5/8/2022 / /	Parry, Susan 2203 Indian Rive Dr. Fort Pierce, FL 34950	I		CH			\$100.00
3							
5/8/2022 / /	Adderly, James & Shirley P.O. Box 2154 Fort Pierce, FL 34954	I		CH			\$100.00
4							
5/10/2022 / /	Gavoni, Vincia ***Protected Voter***	I		CH			\$100.00
5							
5/10/2022 / /	Washington, Alton 1206 N. 20th St. Fort Pierce, FL 34950	I		CA			\$50.00
6							
5/10/2022 / /	Hayes, Ralikh 3035 Arunah Ave. Baltimore , Ma 21216	I		CA			\$50.00
7							
5/16/2022 / /	Watson, Frances 2300 San Marcos Ave Fort Pierce, FL 34946	I		CA			\$25.00
8							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Donna Mills (2) I.D. Number 515  
 (3) Cover Period 5/1/2022 through 5/31/2022 (4) Page 2 of 2

(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	Type	Description	Amendment	Amount
5/9/2022 / /	Wright, Ronald 1211 Ave G Fort Pierce, Fl 34950	I		CH			\$100.00
9							
5/9/2022 / /	Wright, Juanita ***Protected Voter***	I		CH			\$100.00
10							
5/26/2022 / /	Holt, William 4129 57th Ave Vero Beach, Fl 32967	I	consultant	CH			\$500.00
11							
5/26/2022 / /	Watson, Frances 2300 San Marcos Fort Pierce, Fl 34946	I		CA			\$25.00
12							
5/27/2022 / /	Adderly, James 2401 San Marcos Fort Pierce, Fl 34946	I	retired	CH			\$500.00
13							
/ /							
/ /							
/ /							
/ /							

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Donna Mills

(2) I.D. Number 515

(3) Cover Period 5/1/2022 through 5/31/2022

(4) Page 1 of 0

(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					
/ /					
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