

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Christopher C. Strickland

Name

(2) PROTECTED

Address (number and street)

City, State, Zip Code

Check here if address has changed

(3) ID Number: 1019

OFFICE USE ONLY
ONLINE SUBMISSION
 [1233151]

Submitted on:
 10/5/2020 12:43:05 (eastern)

(4) Check appropriate box(es):

Candidate Office Sought: Sheriff

Political Committee (PC)

Electioneering Communications Org. (ECO)

Party Executive Committee (PTY)

Independent Expenditure (IE) (also covers an individual making electioneering communications)

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

(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 \$, 3 , 531 . 73

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 3 , 531 . 73

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 201 , 075 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 201 , 075 . 00

(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 Christopher C. Strickland (2) I.D. Number 1019

8/14/2020 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 Christopher C. Strickland

(2) I.D. Number 1019

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

(4) Page 1 of 2

(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					
8/14/2020 //	Wernicks and Sons Inc, 32 Louise Street St Augustine, Fl 32084	advertising	MO		\$126.74
1					
8/19/2020 //	Wernicks and Sons Inc, 32 Louise Street St Augustine, Fl 32084	advertising	MO		\$87.69
2					
8/19/2020 //	Reliant Florida, 50 N Laura Street 25th Floor Jacksonville, FL 32202	event supplies	MO		\$1,406.74
3					
8/17/2020 //	Hall Financial Corporation, 3791 A1A South Suite B St Augustine, FL 32080	consulting	MO		\$1,000.00
4					
8/18/2020 //	Flowers By Shirley, 2200 Us 1 South St Augustine, FL 32086	flowers for event	MO		\$191.70
5					
8/18/2020 //	Strickland, Tammy ***Protected Voter***	event supplies	MO		\$315.99
6					
8/19/2020 //	Wernicks and Sons, 32 Louise Street St Augustine, Fl 32084	event supplies	MO		\$87.69
7					
8/19/2020 //	Strickland, Christopher ***Protected Voter***	event supplies	MO		\$300.00
8					

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Christopher C. Strickland

(2) I.D. Number 1019

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

(4) Page 2 of 2

(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
9/24/2020 //	Hall Financial Corporation, 3791 A1A South Suite B St Augustine, FL 32080	postage	MO		\$15.18
9					
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