

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Leanna Freeman
 Name

(2) 207 S. Matanzas Blvd.
 Address (number and street)

St. Augustine, FL 32080
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1233288]

Submitted on:
 10/6/2020 11:02:20 (eastern)

Check here if address has changed (3) ID Number: 1064

(4) Check appropriate box(es):

Candidate Office Sought: City of St. Augustine Comm - Seat 2

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 9 / 19 / 2020 To 10 / 2 / 2020 Report Type: G4

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 500 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 500 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 1 , 292 . 09

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 1 , 292 . 09

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

(9) TOTAL Monetary Contributions To Date
 \$, 8 , 725 . 00

(10) TOTAL Monetary Expenditures To Date
 \$, 6 , 515 . 84

(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 Leanna Freeman (2) I.D. Number 1064
 (3) Cover Period 9/19/2020 / 10/2/2020 through 10/2/2020 (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	Type	Description	Amendment	Amount
10/2/2020 / /	Thompson, Paul P.O. Box 70 St. Augustine, FL 32085	I	property manager	CH			\$250.00
1							
9/25/2020 / /	McDaniel, Philip A 7 Milton Street St. Augustine, FL 32084	I	business owner	CH			\$250.00
2							
/ /							
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Leanna Freeman

(2) I.D. Number 1064

(3) Cover Period 9/19/2020 through 10/2/2020

(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					
9/30/2020 / /	Dispatch Depot, 4475 US Highway 1, Suite 205 St. Augustine, FL 32086	mailings	MO		\$120.00
1					
9/23/2020 / /	Dispatch Depot, 4475 Highway US1 Suite 205 St. Augustine, FL 32086	mailings	MO		\$100.00
2					
9/23/2020 / /	Dispatch Depot, 4475 US Highway 1 South, Suite 205 St. Augustine, FL 32086	mailings	MO		\$1,072.09
3					
/ /					
/ /					
/ /					
/ /					
/ /					