CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	Christopher Hileman	OFFICE USE ONLY						
•	Name	ONLINE SUBMISSION [1255799]						
(2)	PROTECTED ADDRESS	Submitted on:						
	Address (number and street)	2/28/2022 11:32:34 (eastern)						
	City, State, Zip Code							
	☐ Check here if address has changed	(3) ID Number: 351						
(4)		(3) ID Nullibel.						
(4)	Check appropriate box(es): \(\text{School Board I} \)	Member Dist 5						
		Member, Disc. 3						
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
	☐ Party Executive Committee (PTY) [☐ Independent Expenditure (IE) (also covers an [☐ Independent Expendent	☐ Check here if PTY has disbanded☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)	_ Clieck liefe if the other in of ne reports will be filed						
	(5) Domont	1.1 (22						
Cove		Identifiers 2 / 20 / 20 22 Papert Type: M2						
	er Period: From $\frac{2}{2}$ / $\frac{1}{2}$ / $\frac{2022}{2}$ To							
		ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
Cash	h & Checks \$, , <u>700</u> . <u>00</u>	Monetary						
Loar	s,,, <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Tota	Monetary \$,, <u>700</u> . <u>00</u>	Total Monetary \$, , 0 . 00						
In-Ki	ind \$, , <u>480</u> . <u>00</u>							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,, <u>800</u> 00_	\$, ,, <u>0</u> 00						
	(11) Cert It is a first degree misdemeanor for any perso							
I certify that I have examined this report and it is true, correct, and complete:								
(T	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		x						
	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	1	(2) I.D. Number						9		
	2/1/2022	2		2/28/	2022					
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
2/22/2022 / /	Hileman, Christopher Lael ***Protected Voter***		government : elections	: IK	signs, business cards and lumber for signs, and petitions.		\$480.0
2/28/2022 / /	Brazier, Marjorie and Duncan 696 E. Belt Ave. Bushnell, FL 33513	I	nurse; business owner	СН			\$500.0
2/28/2022	Johnson, Shirley C. 5762 CR 547 Bushnell, FL 33513	I	retired	СН			\$200.0
1 1							
1 1							
1 1							
1 1	_						
1 1							

(1) Name Chris	AMPAIGN TREA	SURER'S F	REPORT – ITEMIZED)	EXPENDIT 2) I.D. Number	351	
	2/1/2022	49475	28/2022			
(3) Cover Period _		through	<u></u>	4) Page <u>1</u>	of	0
(5)	(7)		(8)	(9)	(10)	(11)
Date	Full Name		Purpose			
(6) (Last, Suffix, First Street Address Street Addr		ess &	(add office sought if contribution to a	Expenditure		A marint

(6) Sequence Number	Full Name (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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