CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Sally Moss	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1281594]							
(2) 1005 Quary Pl	Submitted on:							
Address (number and street) The Villages, FL 32162	9/19/2022 16:22:13 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 355							
(4) Check appropriate box(es):								
Candidate Office Sought: School Board	Member, Dist. 1							
Political Committee (PC) Instance in a Communications One (ECO)	Check have if DC on ECO has disharded							
Electioneering Communications Org. (ECO) Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded							
Independent Expenditure (IE) (also covers an	Check here if no other IE or EC reports will be filed							
individual making electioneering communications)								
(5) Report Identifiers								
Cover Period: From <u>8</u> / <u>19</u> / <u>2022</u> To	0 <u>11</u> / <u>21</u> / <u>2022</u> Report Type: <u>TRP</u>							
🖾 Original 🗌 Amendment 🗌 Sp	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$, , , 0 . 00	Expenditures \$,, <u>163</u> .55							
\$ 0.00	Targeters to							
Loans \$,, <u>0</u> .00	Transfers to Office Account \$,,,0.00							
Total Monetary \$, , 0.00	· · · · · · · · · · · · · · · · · · ·							
	Total Monetary \$, ,163.55							
In-Kind \$,,0.00	,							
	(8) Other Distributions							
	\$,,000							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$,3 ,93500	\$,3_,93500_							
(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)	(Type name)							
or electioneering comm.)								
X	X							
▲ Signature	Signature							

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name <u>Sally Moss</u>				(2) I.D. Number					
	8/19/2022				11/21/2022				
(3) Cover Perio	od/ /	thro	- bugh	1 1	(4) Pag	e ¹	of ⁰		
					_ () 0	N 9 4			
(5)	(7)		(8)	(9)	(10)	(11)	(12)		
Date	Full Name		.,						
(6)	(Last, Suffix, First, Middle)								
Sequence	Street Address &	C	ontributor	Contribution	In-kind				
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount		
				0.816	5				
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			o						
1 1									
	-								
1 1	-								
			-						
1 1	-								
1 1	-								
1 1	-								
1 1	-								
1 1									

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Sall	CAMPAIGN TREASURER'S	() EXPENDIT 2) I.D. Number		355	
(3) Cover Period	8/19/2022 I//through	11/21/2022 //(4) Page <u>1</u>	of_	1	
(5) Date (6) Sequence Number	(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	
8/24/2022	Sumter County School District, 2680 West CR 476 Bushnell, FL 33513	sumter schools enhancement foundation (501c3) school	МО		\$163.55	
//						
_/ /						
_/ /						
_ / _						
11						
_ / /						

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SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES