	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Rebecca Morrison	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	204 Jumper Dr. S	Submitted on:						
	Address (number and street)	6/28/2022 05:20:23 (eastern)						
	Bushnell, FL 33513							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:392						
(4)	Check appropriate box(es):							
	☐ Candidate Office Sought: City of Bushner	ell, Seat 5						
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ 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	dentifiers						
Cove	er Period: From 6 / 1 / 2022 To							
		ecial Election Report						
		T						
(6)	Contributions This Report	(7) Expenditures This Report						
<b>2</b> - 1	\$ 0.00	Monetary Expenditures \$ , , 42 . 00						
Casi	h & Checks \$ , , 0 . 00	Expenditures \$ , , <u>42</u> . <u>00</u>						
Loar	ns \$ , , 0.00	Transfers to						
		Office Account \$ , , 0 . 00						
Tota	ıl Monetary \$ , , 0 . 00							
		Total Monetary \$ , , 42 . 00						
In-Ki	ind \$ , , 0.00							
		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(0)	TOTAL Manual Contributions To Date							
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,, <u>100</u> . <u>00</u>	\$ , , <u>42</u> . <u>00</u>						
	(11) Cert	tification						
	It is a first degree misdemeanor for any person							
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:						
(T	(Type name) (Type name)							
	ype name)  Individual (only for IE  Treasurer Deputy Treasurer	☐ Candidate ☐ Chairperson (only for PC and PTY)						
	electioneering comm.)							
х		X						
	gnature	Signature						

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Rebecca Morrison				2) I.D. Numbe	er3	92
	6/1/2022 od/////	thro	ough	/17/2022 //	(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8)		(9)	(10)	(11)	(12)
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Allendirent	Amount
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DS-DE 13 (Rev. 11/13 )

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Rebecca	Morri	son				 (2) I.D. Nur	nber	3	392	
	6	/1/20	22		6/17/20	22					
(3) Cover P	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
6/3/2022	Suoervisor of Elections, 7375 Powell Road Suite 125	qualifying fee	MO		\$42.00
1	Wildwood, FL 34785				
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DS-DE 14 (Rev					