

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Randall Allen Parrish
 Name
 (2) 105 NE 8th Ave
 Address (number and street)
Lake Butler, FL 32054
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1164724]

Submitted on:
 8/3/2018 09:04:07 (eastern)

Check here if address has changed (3) ID Number: 91

(4) Check appropriate box(es):

Candidate Office Sought: Dist # 1 School Board

Political Committee (PC) Check here if PC or ECO has disbanded

Electioneering Communications Org. (ECO) Check here if PTY has disbanded

Party Executive Committee (PTY) Check here if no other IE or EC reports will be filed

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

(5) Report Identifiers

Cover Period: From 3 / 1 / 2018 To 3 / 31 / 2018 Report Type: _____

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 0 . 00

Loans \$ _____ , _____ , 150 . 00

Total Monetary \$ _____ , _____ , 150 . 00

In-Kind \$ _____ , _____ , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 21 . 20

Transfers to Office Account \$ _____ , _____ , 0 . 00

Total Monetary \$ _____ , _____ , 21 . 20

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

(9) TOTAL Monetary Contributions To Date
 \$ _____ , _____ , 150 . 00

(10) TOTAL Monetary Expenditures To Date
 \$ _____ , _____ , 150 . 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 Randall Allen Parrish (2) I.D. Number 91

3/1/2018 through 3/31/2018

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (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
3/16/2018 / /	Parrish, Randall allen 105 North East 8th Avenue Lake Butler, FL 32054	S	paramedic	LO			\$150.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Randall Allen Parrish

(2) I.D. Number 91

(3) Cover Period 3/1/2018 through 3/31/2018

(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					
3/22/2018 / /	Commjunity State Bank, 220 S.E. 6th Street Lake Butler, Fl 32054	campaign acct. checks	MO		\$21.20
1					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					