

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Roxann Goodman
 Name

(2) 391 W. Michigan Avenue
 Address (number and street)

Lake Helen, FL 32744
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1216520]

Submitted on:
 7/14/2020 19:50:09 (eastern)

Check here if address has changed

(3) ID Number: 693

(4) Check appropriate box(es):

- Candidate Office Sought: Lake Helen Commission Zone 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 6 / 27 / 2020 To 7 / 10 / 2020 Report Type: P3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 430 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 430 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, , 475 . 00

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, , 475 . 00

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, , 670 . 00

(10) TOTAL Monetary Expenditures To Date

\$, , 475 . 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 Roxann Goodman (2) I.D. Number 693
 (3) Cover Period 6/27/2020 through 7/10/2020 (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 | | | | | | | |
| 6/27/2020 / / | REID , DAVION 391 WEST DELAWARE ST LAKE HELEN, FL 32744 | I | student | CA | | | \$50.00 |
| 1 | | | | | | | |
| 6/27/2020 / / | REID, HERMIA 391 WEST DELAWARE AVENUE LAKE HELEN, FL 32744 | I | retired | CA | | | \$50.00 |
| 2 | | | | | | | |
| 6/27/2020 / / | REID, ABBY 391 WEST DELAWARE LAKE HELEN, FL 32744 | I | student | CA | | | \$30.00 |
| 3 | | | | | | | |
| 6/30/2020 / / | HAMMETT, JOE 155 N LAKEVIEW DRIVE LAKE HELEN, FL 32744 | I | retired | CH | | | \$100.00 |
| 4 | | | | | | | |
| 6/27/2020 / / | TAYLOR, RICK 208 N HIGH STREET LAKE HELEN, FL 32744 | I | unknown | CH | | | \$200.00 |
| 5 | | | | | | | |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Roxann Goodman

(2) I.D. Number 693

(3) Cover Period 6/27/2020 through 7/10/2020

(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 | | | | | |
| 6/30/2020 // | LOCKART, RILEE 678 COLLINS ROAD LITTLE HOCKING, OH 45742 | campaign signs | MO | | \$425.00 |
| 1 | | | | | |
| 7/8/2020 // | Lewis, Lisa 1750 South Woodland Blvd Deland, FL 32720 | reporting fee | MO | | \$50.00 |
| 2 | | | | | |
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