

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Democratic Executive Committee  
 Name  
 \_\_\_\_\_  
 Address (number and street)  
Crawfordville, FL 32327  
 \_\_\_\_\_  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1152691]

Submitted on:  
 4/10/2018 12:01:38 (eastern)

Check here if address has changed

(3) ID Number: 13

(4) Check appropriate box(es):

- |  |  |
|--|--|
| <input type="checkbox"/> Candidate Office Sought: _____  | <input type="checkbox"/> Check here if PC or ECO has disbanded                 |
| <input type="checkbox"/> Political Committee (PC)  | <input type="checkbox"/> Check here if PTY has disbanded                       |
| <input type="checkbox"/> Electioneering Communications Org. (ECO)  | <input type="checkbox"/> Check here if no other IE or EC reports will be filed |
| <input checked="" type="checkbox"/> Party Executive Committee (PTY)  |  |
| <input type="checkbox"/> Independent Expenditure (IE) (also covers an individual making electioneering communications) |  |

### (5) Report Identifiers

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

Original       Amendment       Special Election Report

#### (6) Contributions This Report

Cash & Checks	\$ _____ , _____ , <u>500</u> . <u>00</u>
Loans	\$ _____ , _____ , <u>0</u> . <u>00</u>
Total Monetary	\$ _____ , _____ , <u>500</u> . <u>00</u>
In-Kind	\$ _____ , _____ , <u>0</u> . <u>00</u>

#### (7) Expenditures This Report

Monetary Expenditures	\$ _____ , _____ , <u>150</u> . <u>00</u>
Transfers to Office Account	\$ _____ , _____ , <u>0</u> . <u>00</u>
Total Monetary	\$ _____ , _____ , <u>150</u> . <u>00</u>

#### (8) Other Distributions

\$ \_\_\_\_\_ , \_\_\_\_\_ , 0 . 00

#### (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ , 20 , 825 . 82

#### (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ , 19 , 010 . 58

### (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 Democratic Executive Committee (2) I.D. Number 13  
 1/1/2018 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
3/1/2018 / /	Barnes, Nikki 287 Revell Rd Crawfordville, FL 32327	I communicat ion manager	CH			\$200.00
1						
3/6/2018 / /	Pasini, Al 24 Carriage Drive Crawfordville, FL 32327	I retired	CH			\$250.00
2						
1/6/2018 / /	Peck, Dana C 2481 Surf Road Panacea, FL 32346	I	CH			\$50.00
3						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						
/ /						

**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Democratic Executive Committee

(2) I.D. Number 13

(3) Cover Period 1/1/2018 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					
1/9/2018 //	Wakulla County SOE , 3115B Crawfordville Hwy Crawfordville, FL 32327	late filing fee	MO		\$150.00
1					
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