

## CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ralph Thomas  
 Name

(2) 637 Hunters Trace  
 Address (number and street)  
Crawfordville, FL 32327  
 City, State, Zip Code

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1120238]

Submitted on:  
 8/14/2016 14:15:48 (eastern)

Check here if address has changed

(3) ID Number: 39

(4) Check appropriate box(es):

- Candidate Office Sought: County Commissioner District 1
- 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 7 / 30 / 2016 To 8 / 5 / 2016 Report Type: P5

Original  Amendment  Special Election Report

#### (6) Contributions This Report

Cash & Checks \$        ,        , 375 . 00

Loans \$        ,        , 0 . 00

Total Monetary \$        ,        , 375 . 00

In-Kind \$        ,        , 0 . 00

#### (7) Expenditures This Report

Monetary Expenditures \$        ,        , 182 . 00

Transfers to Office Account \$        ,        , 0 . 00

Total Monetary \$        ,        , 182 . 00

#### (8) Other Distributions

\$        ,        , 0 . 00

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

\$        ,        , 8 , 630 . 00

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

\$        ,        , 6 , 895 . 52

### (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 Ralph Thomas (2) I.D. Number 39  
 (3) Cover Period 7/30/2016 through 8/5/2016 (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		Type	Occupation				
8/5/2016 / /	Chichetti, Richard 1305 Thomaswood Dr. Tallahassee, FL 32308	I	dentist	CH			\$150.00
1							
8/5/2016 / /	Shriver, Deanna 68 Connie Drive Crawfordville, FL 32327	I		CH			\$100.00
2							
8/5/2016 / /	Gandy, Sally PO Box 710 Panacea, FL 32346	I		CH			\$25.00
3							
8/5/2016 / /	Thomas, Cynthia 637 Hunters Trace Crawfordville, FL 32327	I		CA			\$50.00
4							
8/5/2016 / /	Thomas, Carl 256 Magnolia Ridge Crawfordville, FL 32327	I		CA			\$50.00
5							
/ /							
/ /							
/ /							
/ /							

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

(1) Name Ralph Thomas

(2) I.D. Number 39

(3) Cover Period 7/30/2016 through 8/5/2016

(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
8/3/2016 / /	Cobb, Debbie 85 New Light Church Road Crawfordville, FL 32327	embroidery	MO		\$82.00
1					
8/5/2016 / /	Wakulla County Coalition for, Youth 318 Shadeville Hwy Crawfordville, FL 32327	donation	MO		\$100.00
2					
/ /					
/ /					
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