CAMPAIGN TREASURER'S REPORT SUMMARY										
(1)	Rhonda Skipper	OFFICE USE ONLY								
	Name	ONLINE SUBMISSION								
(2)	380 Cat Island Rd	Submitted on:								
	Address (number and street)	4/20/2021 10:15:08 (eastern)								
	DeFuniak Springs, FL 32433 City, State, Zip Code									
	Check here if address has changed	(3) ID Number: 477								
(4)	Check appropriate box(es):									
(-)	☐ Check appropriate box(es). ☐ Candidate Office Sought:									
	(5) Report	Identifiers								
Cove	er Period: From 10 / 30 / 2020 To	1 / 31 / 2021 Report Type: TR-G								
o [riginal Amendment Spo	ecial Election Report								
(6)	Contributions This Report	(7) Expenditures This Report								
Casl	n & Checks \$, , 000	Monetary								
Loar		Transfers to Office Account \$, , , 0 . 00								
Tota	I Monetary \$, , 000	Total Monetary \$. 0 . 00								
In-Ki	nd \$,,,000	,,,,								
		(8) Other Distributions \$, , 000_								
(9)	TOTAL Monetary Contributions To Date \$, , _20000	(10) TOTAL Monetary Expenditures To Date \$, , 20000								
(T)	3 1	(Type name) Candidate Chairperson (only for PC and PTY)								
X Si	gnature	X Signature								

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Rhonda Skipper	(2) I.D. Number								
	10/30/2020		1	/31/2021		1	0			
(3) Cover Perio	od / /	thro	ough	<i>l l</i>	(4) Pag	e	of			
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)			
Sequence Number	Street Address & City, State, Zip Code	Contributor Type Occupation		Contribution Type	In-kind Description	Amendment	Amount			
Number	Oity, State, Zip Gode	Турс	Occupation	Турс	Description		Amount			
J I										
1 1										
1 1										
f f										
f f										
J I										
J I										
J I										

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name	Rhonda	Skippe	r	21102000000000000000000000000000000000	SVERING TO STANDON THE PROPERTY OF		12,000 6,000	(2) I.D. Nun	nber	4	177	
		10/30/2	2020		1/31/20	21						
(3) Cover Po	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
1/26/2021	Skipper, Rhonda Candidate to Themselves 380 Cat Island Rd DeFuniak Springs, FL 32433	repayment of loan	DI	Add	\$127.92
//					
//					
//					
_//					
//					
/ /					
DS-DE 14 (Rev					