	CAMPAIGN TREASURE	R'S REPORT SUMMARY						
(1)	Marsha Winegarner	OFFICE USE ONLY						
(-)	Name	ONLINE SUBMISSION						
(2)	968 Winegarner Road	[1208929] Submitted on:						
	Address (number and street)	6/8/2020 11:52:55 (eastern)						
	DeFuniak Springs, FL 32435							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number: 486						
(4)	Check appropriate box(es):							
	Candidate Office Sought: School Board	District 4						
	Political Committee (PC)	Cheek have if DC as FCO has dishauded						
	☐ Electioneering Communications Org. (ECO)☐ Party Executive Committee (PTY)	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an	☐ Check here if no other IE or EC reports will be filed						
	individual making electioneering communications)							
	(5) Report	Identifiers						
Cove	er Period: From 5 $\frac{1}{2020}$ To							
		ecial Election Report						
		<u> </u>						
(6)	Contributions This Report	(7) Expenditures This Report						
Casł	n & Checks \$, , ,000	Monetary						
Loar	s , , , <u>0</u> . <u>00</u>	Transfers to Office Account \$, , 0 . 00						
Tota	I Monetary \$, , , 000	Total Monetary \$, , 54 . 00						
In-Ki	nd \$, , 0.00							
		(8) Other Distributions						
		\$, , <u>0</u> . <u>00</u>						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$, <u>3</u> , <u>000</u> . <u>00</u>	\$, ,, 54 . 00						
		tification on to falsify a public record (ss. 839.13, F.S.)						
١n	ertify that I have examined this report and it is true, corr	• • • • • • •						
	ype name)	(Type name)						
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)						
X		X						
Sig	gnature	Signature						

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Marsha Winegarner				2) I.D. Numbe	er4	86
	5/1/2020		5	/31/2020			
(3) Cover Perio	od//	thro	ough	11	(4) Pag	e	of
1000 98							
(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date	Full Name						
(6)	(Last, Suffix, First, Middle)						
Sequence	Street Address &		ontributor	Contribution	In-kind		
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount
1 1							
*							
I = I							
1 1							
9 5							
1 1							
1							
1 1							
J I							
<i>3</i> 6							
1 1							
**							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _M	Iarsha	Winega	rner				 (2) I.D. Nun	nber	4	486	- P
		5/1/20	20		5/31/20	20					
(3) Cover Pe	eriod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
Date (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
5/19/2020	StickersBanners. Inc., 3770 Peachree Crest Dr. Duluth, GA 30097-8165	labels for signage	МО		\$54.00
1					
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DS-DE 14 (Rev.					