CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Michael T. Norris	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	206 Crescent Road	Submitted on:							
	Address (number and street)	10/10/2020 10:31:18 (eastern)							
	Santa Rosa Beach, FL 32459 City, State, Zip Code								
	☐ Check here if address has changed	(3) ID Number: 505							
(4)	_	(3) 12 (Valliser:							
(-)	Check appropriate box(es): Candidate Office Sought: South Walton Mosquito Seat #2 Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if PTY has disbanded Check here if no other IE or EC reports will be filed								
	(5) Report	Identifiers							
Cove	er Period: From 9 / 19 / 2020 To								
<u>X</u> 0	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casł	h & Checks \$, , <u>750</u> . <u>00</u>	Monetary Expenditures \$,2 , 204 . 28							
Loar		Transfers to Office Account \$, , , 0 . 00							
	I Monetary \$,	Total Monetary \$, 2 , <u>204</u> . <u>28</u>							
In-Ki	ind \$,,, <u>0</u> . <u>00</u>								
		(8) Other Distributions \$, , 000_							
(9)	TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$, 5 , _02721							
(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 Candidate Chairperson (only for PC and PTY)									
	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Michael T. Norris	(2) I.D. Number							
	9/19/2020			0/2/2020					
(3) Cover Per	iod / /	thr	ough	<i>I I</i>	(4) Pag	e <u>1</u>	of		
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)		(8)	(9)	(10)	(11)	(12)		
Sequence Number	Street Address & City, State, Zip Code	C Type	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount		
9/28/2020	Norris , George PO Box 16118 Panama City, FL 32406-6118		insurance	СН			\$250.		
1									
9/28/2020	Anderson, Colby 48 Seclusion Way Santa Rosa Beach , F 32459	I	contractor	CH			\$500.		
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name _	Michael	T. No	orris				 (2) I.D. Nun	nber	5	505	
	9	9/19/2	020		10/2/2	020					
(3) Cover P	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
9/29/2020	Evergreen, 318 Beverly Pkwy Pensacola , FL 32505	campaign cards	MO		\$1,875.25
9/22/2020	Smith Signs , Smith 24 South 8th St Defuniak Springs, FL 32435	shirts	МО		\$329.03
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