CAMPAIGN TREASURER'S REPORT SUMMARY								
(1) Linda Lou Cleveland	OFFICE USE ONLY							
Name	ONLINE SUBMISSION [1108966]							
(2) <u>315 Hwy 273</u> Address (number and street)	Submitted on:							
Chipley, Fl 32428	6/27/2016 16:19:12 (eastern)							
City, State, Zip Code								
Check here if address has changed	(3) ID Number: 33							
(4) Check appropriate box(es):								
Candidate Office Sought: School Board	Member District 2							
<ul> <li>Political Committee (PC)</li> <li>Electioneering Communications Org. (ECO)</li> </ul>	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 <u>5</u> / <u>1</u> / <u>2016</u> To	0 <u>5</u> / <u>31</u> / <u>2016</u> Report Type: <u>2016</u> <u>2016</u>							
Original Amendment Sp	pecial Election Report							
(6) Contributions This Report	(7) Expenditures This Report							
	Monetary							
Cash & Checks \$ , , , 0 . 00	Expenditures \$ , , <u>60</u> . <u>00</u>							
Loans \$, 0.00	Transfers to							
	Office Account \$ _ , _ , _ 0 . 00							
Total Monetary \$,,								
	Total Monetary \$,, 60 . 00							
In-Kind \$,, 00								
	(8) Other Distributions \$ , , 0, 00							
	\$,, <u>0</u> . <u>00</u>							
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date							
\$, <u> </u>	\$,,44421							
(11) Ce	tification							
(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, cor	rect, and complete:							
(Type name) (Type name)								
Individual (only for IE Treasurer Deputy Treasurer	Candidate Chairperson (only for PC and PTY)							
or electioneering comm.)								
X	_X							
Signature	Signature							

DS-DE 12 (Rev. 11/13)

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name				(2) I.D. Number				
	5/1/2016		5	/31/2016		. 1	0	
(3) Cover Peri	od / /	thro	bugh	11	(4) Page	e	of	
(5) Date (6)	(7) Full Name (Last, Suffix, First, Middle)	(8)		(9)	(10)	(11)	(12)	
Sequence	Street Address &	C	ontributor	Contribution	In-kind			
Number	City, State, Zip Code	Туре	Occupation	Туре	Description	Amendment	Amount	
1 1	_							
+ 1	_							
1 1	_							
1 1	_							
1 1	_							
1 1	_							
1 1	_							
1 1	_							

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Name Lind	<b>CAMPAIGN TREASURER'</b> a Lou Cleveland		EXPENDITURES () I.D. Number 33		
(3) Cover Period	5/1/2016 I/through_	5/31/2016 /	4) Page <u>1</u>	of_	1
(5) Date (6) Sequence Number	(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
	City of Wausau, 1607 2nd Avenue Wausau, Fl 32428	advertisement in possum day program	MO		\$60.00
_ / /					
_ / /					
_/ /					
_/ /					
11					
11					
11					

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES