	CAMPAIGN TREASURER'S REPORT SUMMARY							
(1)	Linda Lou Cleveland	OFFICE USE ONLY						
	Name	ONLINE SUBMISSION						
(2)	315 Hwy 273	Submitted on:						
	Address (number and street)	8/19/2020 22:34:51 (eastern)						
	Chipley, FL 32428  City, State, Zip Code	<del></del>						
	☐ Check here if address has changed	(3) ID Number: 51						
(4)	_	(9) ID Number.						
(4)	Check appropriate box(es):  X Candidate Office Sought: School Board I	Member District 2						
	Political Committee (PC)	Meliber Discrice 2						
	☐ Electioneering Communications Org. (ECO)	Check here if PC or ECO has disbanded						
		☐ 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						
	, , ,	Identifiers						
Cove	er Period: From $8 / 14 / 2020$ To	8 / 21 / 2020 Report Type: G1						
X O	Original Amendment Spe	ecial Election Report						
(6)	Contributions This Report	(7) Expenditures This Report						
	-	Monetary						
Casl	h & Checks \$ , , _11 . 39	Expenditures \$ , , 0 . 00						
Loor	ns \$ , , 0.00	Transfers to						
Loar	ıs	Office Account \$ , , 0 . 00						
Tota	al Monetary \$ , , 11 . 39	,,,						
1014	, , , , ,	Total Monetary \$ , , 0 . 00						
In-Ki	ind \$ , , 0.00	,, ,, ,,,						
••••		(8) Other Distributions						
		\$,, <u>0</u> . <u>00</u>						
(0)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
(9)	\$, 3_, 696 . 39	(10) TOTAL Monetary Expenditures To Date \$ , 1 , _29227						
	, <u> </u>	Ψ, <u> </u>						
	(11) Cert							
	It is a first degree misdemeanor for any person	on to falsify a public record (ss. 839.13, F.S.)						
Ιc	certify that I have examined this report and it is true, corre	ect, and complete:						
(T	ype name)	(Type name)						
	Individual (only for IE  Treasurer Deputy Treasurer electioneering comm.)	☐ Candidate ☐ Chairperson (only for PC and PTY)						
Х		X						
	ignature	Signature						

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name Lin	da Lou C	levelaı	nd		(2	?) I.D. Number		51		- 12
	8/14/202	20		8/21/	2020					
(3) Cover Period	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)		(8)	(9)	(10)	(11)	(12)
Date (6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	ontributor	Contribution Type	In-kind Description	Amendment	Amount
8/14/2020	Cleveland, Lou 315 Highway 273 Chipley, FL 32428	S	retired	CA	stamps		\$11.0
8/14/2020 / / 2	Cleveland, Lou 315 Highway 273 Chipley, FL 32428	S	retired	CA	labels from the supervisor of elections office		\$0.3
1 1							
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1 1							

3) Cover Period	Lou Cleveland 8/14/2020 / / through	8/21/2020	(2) I.D. Number (4) Page1	·	0
(5) Date  (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sough contribution to candidate)		(10)	(11) Amount
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