CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) Linda Lou Cleveland	OFFICE USE ONLY						
Name	ONLINE SUBMISSION [1227521]						
(2) <u>315 Hwy 273</u> Address (number and street)	Submitted on:						
Address (number and street) Chipley, FL 32428	8/25/2020 10:38:45 (eastern)						
City, State, Zip Code							
Check here if address has changed	(3) ID Number: 51						
(4) Check appropriate box(es):							
Candidate Office Sought: School Board	Member District 2						
Political Committee (PC) Flaction control (F20)							
	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							
Cover Period: From <u>6</u> / <u>1</u> / <u>2019</u> To	<u>11</u> / <u>3</u> / <u>2020</u> Report Type: <u>TRP</u>						
🖾 Original 🗌 Amendment 🗌 Sp	ecial Election Report						
(6) Contributions This Report	(7) Expenditures This Report						
	Monetary						
Cash & Checks \$, , , 0 . 00	Expenditures \$, , , 00						
Loans \$,,0.00	Transform to						
	Transfers to Office Account \$						
Total Monetary \$, , 0.00	· , , , <u></u> , <u></u>						
	Total Monetary \$, , 0 . 00						
In-Kind \$,,0.00							
	(8) Other Distributions						
	\$,,000						
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
\$, <u>3</u> , <u>696</u> . <u>39</u>	\$, <u> 3</u> , <u> 696</u> . <u> 39</u>						
(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							
(Type name)	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. Number51						
6/1/2019			11/3/2020					
(3) Cover Peri	od / /	thro	ough	<i>II</i>	(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	CAMPAIGN TREASURER'S a Lou Cleveland	() EXPENDIT 2) I.D. Numbei	51	
(3) Cover Period	6/1/2019 I/_/through	11/3/2020 //	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
	Cleveland, Lou 315 Highway 273 Chipley, FL 32428	reimbursement of unused campaign funds donated by candidate	DI		\$2,404.12
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_/ /					
_ / /					
//					
_ / _					
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DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES