	CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1)	Travis Hall	OFFICE USE ONLY
	Name	ONLINE SUBMISSION
(2)	2875 Parrish Still Road	Submitted on:
	Address (number and street)	6/18/2020 13:23:20 (eastern)
	Vernon, FL 32462	
	City, State, Zip Code	
	Check here if address has changed	(3) ID Number:55
(4)	Check appropriate box(es):	
	Candidate Office Sought: County Commis	sioner District 1
	Political Committee (PC)	☐ Check here if PC or ECO has disbanded
	☐ Electioneering Communications Org. (ECO) ☐ Party Executive Committee (PTY)	☐ 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	dentifiers
Cove		6 / 12 / 2020 Report Type: P1
		ecial Election Report
		·
(6)	Contributions This Report	(7) Expenditures This Report
Cook	n & Checks \$, , 0 . 00	Monetary Expenditures \$, , 0 . 00
Casi	1 & Checks	
Loar	ns \$, , 0.00	Transfers to
		Office Account \$, , 0 . 00
Tota	I Monetary \$, , 0 . 00	
		Total Monetary \$, , 0 . 00
In-Ki	nd \$, , <u>250</u> . <u>00</u>	
		(8) Other Distributions
		\$,,, <u>0</u> . <u>00</u>
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
	\$,, 200.00	\$, , 0.00
	(11) Cert It is a first degree misdemeanor for any pers	
1 C	ertify that I have examined this report and it is true, corr	ect, and complete:
	ype name)	(Type name)
	Individual (only for IE	☐ Candidate ☐ Chairperson (only for PC and PTY)
Х		×
	gnature	Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Travis Hall	(2) I.D. Number					
	6/1/2020			/12/2020			
(3) Cover Peri	od//	thro			(4) Pag	e <u>1</u>	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &		(8)	(9)	(10) In-kind Description	(11)	(12)
Number	City, State, Zip Code Hall-, Travis M	Type	Occupation self	Type IK	political	Amendment	\$250.0
6/11/2020	2875 Parrish Still Road Vernon, FL 32462		employed		signs		,
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1 1							
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10							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

Name Travi	6/1/2020 6/	12/2020	(2) I.D. Numbe	i	55
Cover Period	//through	1	(4) Page <u>1</u>	of	0
(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)	(11) Amount
//					
//					
//					
//					
//					
//					

DC.	DE	11	/Pov	11/13	1