CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Stephanie Blankenship

Name

(2) 625 2nd Street

Address (number and street)

Chipley, FL 32428

City, State, Zip Code

☐ **Check here if address has changed**

(3) ID Number: _____ 66

(4) Check appropriate box(es):

☒ Candidate   Office Sought: Clerk of the Circuit Court and Comptroller
☐ Political Committee (PC)
☐ Electioneering Communications Org. (ECO)   ☐ **Check here if PC or ECO has disbanded**
☐ 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 Identifiers

Cover Period: From 4 / 1 / 2020   To 4 / 30 / 2020   Report Type: M4

☒ Original   ☐ Amendment   ☐ Special Election Report

(6) Contributions This Report

Cash & Checks	$ ___ , ___ , 100 . 00
Loans	$ ___ , ___ , 0 . 00
Total Monetary	$ ___ , ___ , 100 . 00
In-Kind	$ ___ , ___ , 500 . 00

(7) Expenditures This Report

Monetary Expenditures	$ ___ , ___ , 22 . 28
Transfers to Office Account	$ ___ , ___ , 0 . 00
Total Monetary	$ ___ , ___ , 22 . 28

(8) Other Distributions

$ _____ , _____ , 0 . 00

(9) TOTAL Monetary Contributions To Date

$ _____ , _____ , 100 . 00

(10) TOTAL Monetary Expenditures To Date

$ _____ , _____ , 22 . 28

(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   ☐ Treasurer   ☐ Deputy Treasurer
or electioneering comm.)

X _____

Signature

(Type name) _____

☐ Candidate   ☐ Chairperson (only for PC and PTY)

X _____

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name _Stephanie Blankenship_ **(2) I.D. Number** _66_

(3) Cover Period _4/1/2020_ ___/___/___ through _4/30/2020_ ___/___/___ **(4) Page** _1_ of _1_

(5) Date / (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
4/17/2020 / / 1	Blankenship, Stephanie Nichole 625 2nd Street Chipley, Fl 32428	S	office manager	CH			$100.00
4/20/2020 / / 2	Blankenship, Stephanie Nichole 625 2nd Street Chipley, Fl 32428	S	office manager	IK	political signs, stands, tape, paper		$500.00
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

DS-DE 13 (Rev. 11/13)   SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Stephanie Blankenship

(2) I.D. Number 66

(3) Cover Period 4/1/2020 / / through 4/30/2020 / /

(4) Page 1 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
4/29/2020 / / 1	Community South Credit Union, 1044 Hwy 90 E Chipley, Fl 32428	campaign checks	MO		$22.28
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

CAMPAIGN TREASURER'S REPORT – FUND TRANSFERS

(1) Name _Stephanie Blankenship_ **(2) I.D. Number** _66_

(3) Cover Period _4/1/2020_ **through** _4/30/2020_ **(4) Page** _1_ **of** _1_

(5) Date / (6) Sequence Number	(7) Name of Financial Institution Street Address & City, State, Zip Code	(8) Transfer Type	(9) Nature of Account	(10) Amendment	(11) Amount
4/22/2020 / 1	Community South Credit Union, 1044 Hwy 90 E Chipley, Fl 32428	FROM	checking 1 to savings 0		$5.00

DS-DE 94 (Rev. 11/13)