

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Coalition For Access and Representation
 Name _____
 (2) 730 Minnesota Ave
 Address (number and street) _____
 Winter Park, FL 32789
 City, State, Zip Code _____

OFFICE USE ONLY

09-02-20P02:44 RCVD

(3) ID Number: _____

Check here if address has changed

(4) Check appropriate box(es):

- Candidate Office Sought: _____
- Political Committee (PC)
- Electioneering Communications Org. (ECO)
- Party Executive Committee (PTY)
- Independent Expenditure (IE) (also covers an individual making electioneering communications)
- Check here if PC or ECO has disbanded
- Check here if PTY has disbanded
- Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 8 / 1 / 2020 To 8 / 30 / 2020 Report Type: MR

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , 575.00

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , 575.00
(B)

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , 398.00

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , 1 , 488.00

(10) TOTAL Monetary Expenditures To Date

\$ _____ , 1 , 317.07
1 317.07 (B)

(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) Barbara Chandler
 Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

(Type name) Barbara Chandler
 Candidate Chairperson (only for PC and PTY)

X 
 Signature

X 
 Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Coalition For Access & Representation (2) I.D. Number _____

(3) Cover Period Aug 1 / 1 / 20 through Aug 30 / 20 / 2020 (4) Page _____ of _____

| (5) Date | (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 |
|---------------------------|--|---|-----------------------|-----------------------------|--------------------------------|-------------------|----------------|
| (6) Sequence Number | | Type | Occupation | Type | Description | | Amount |
| 8 / 26 / 2020 | Michelle Hipp 457 Leymore Ave WP. FL 32787 | I | Home maker | I | Electronic PP | | \$2500 |
| 8 / 27 / 2020 | Dawn Roe 295 S. French Broad Ave. NC 28901 | I | College Instructor | I | Electronic PP | | \$50.00 |
| 8 / 28 / 2020 | Michael Barino 704 King Circle Winter FL | I | | I | Electronic PP | | \$100 |
| 8 / 30 / 2020 | Barbara Chandler 100 W. Interstate Ave WP | I | Art Manager | I | Cash PP | | \$400 |
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Coalition for Access & Representation (2) I.D. Number _____

(3) Cover Period Aug 1, 2020 through Aug 30, 2020 (4) Page _____ of _____

| (5) Date | (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 |
|-------------|--|--|----------------------------|-------------------|---------------------|
| 8/18/2020 | Chandler, Barbara Chandler, Barbara 730 Main Street Av. WP 02787 | Office Rent | | | \$295.00 |
| 8/18/2020 | Commercial Realty Group Inc Dec 2265 VT 02789 | office space | IEI | | 295.00 |
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