

CAMPAIGN TREASURER'S REPORT SUMMARY

OFFICE USE ONLY

(1) Rebekah Ricks
Name

(2) 1085 W Lake Hamilton Dr
Address (number and street)

Winter Haven, FL 33881
City, State, Zip Code

Check here if address has changed

(3) ID Number: 276

(4) Check appropriate box(es):

- Candidate Office Sought: School Board District 4
- 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 individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 4 / 1 / 2024 To 6 / 14 / 2024 Report Type: P1

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 2 , 067 . 96

Transfers to Office Account \$, , 0 . 00

Total Monetary \$, 2 , 067 . 96

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 9 , 754 . 81

(10) TOTAL Monetary Expenditures To Date

\$, 4 , 717 . 40

(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 or electioneering comm.) Treasurer Deputy Treasurer

X _____
Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Rebekah Ricks (2) I.D. Number 276

4/1/2024 through 6/14/2024

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

(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
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Rebekah Ricks

(2) I.D. Number 276

(3) Cover Period 4/1/2024 through 6/14/2024

(4) Page 1 of 1

(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
(6) Sequence Number					
6/13/2024 //	SUPERVISOR OF ELECTION, POLK COUNTY 250 S BROADWAY AVE BARTOW, FL 33830	qualifying fee	MO	Add	\$2,067.96
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