

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name CONNIE BENNETT-MARTIN

(2) I.D. Number _____

(3) Cover Period 07 / 18 / 2020 through 07 / 24 / 2020

(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					
07 / 20 / 20	PAYPAL PO BOX 105658 Atlanta, GA, 30348	Credit Card Processing	CAN		3.20
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