

## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

Chauncey Solinger

(1) Name \_\_\_\_\_

(2) I.D. Number \_\_\_\_\_

07/25/2020

07/31/2020

(3) Cover Period \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(4) Page \_\_\_\_ of \_\_\_\_

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
/ /	n/a						
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