Rage 1

CAMPAIGN TREASURER'S REPORT SUMMARYAT LAUDERDALE					
Name Address (number and street) City, State, Zip Code 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)	(3) ID Number: 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 10 / 1 / 23 To 12 31 / 23 Report Type: Q 4 Original Amendment Special Election Report					
Cash & Checks \$	(7) Expenditures This Report Monetary Expenditures \$,,				
9) TOTAL Monetary Contributions To Date \$, , ,	(10) TOTAL Monetary Expenditures To Date \$,,,				
It is a first degree misdemeanor for any personal certify that I have examined this report and it is true, correctly that I have examined the interest and it is true, correctly that I have examined the interest and it is true, correctly that I have examined the interest and it is true, correctly that I have examined the interest and	on to falsify a public record (ss. 839.13, F.S.)				

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CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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(1) Name	redIns	er	ra	(2) I.D. Numbe	r	
(3) Cover Perio	d 10/1/2	5 thro	ugh 12	31/23	(4) Page	·	of
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	1	(8)	(9)	(10)	(11)	(12)
Number	City, State, Zip Code	1	Occupation		Description	Amendment	Amount
12/8/23	Lori	1	Dosign	Che			5.00
12 19 23	Tay	\	Codl	che			2.00
12,25,23	Kothleen	1 :	friend	che			50.00
2,28,23	Chery] Insona	1	Covan	Che			50,00
1 1							
1 1							

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

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CAMPAIGN TREASURER'S REPORT - FUND TRANSFERS (2) I.D. Number (3) Cover Period \(\cap \) (4) Page of (7) (5) (8) (9) (10) (11) Date Name of Financial (6) Institution Sequence Street Address & Transfer Nature of Number City, State, Zip Code Type Account Amendment Amount Checking

(1) Name (2) I.D. Number						
(3) Cover Peri	od 10 / 1 / 23through 12	<u> 1,31,23</u>	(4) Page		of	
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought i contribution to a candidate)	Expenditu Type	Amendmen	t Amount	
10/25/23	Lori Fanne Edgewood	r Web Desyan	DIS		300 a	
1/3/2	SEPG Design	web Design	DIS		200°	
12/103	SEPG DOSGN	web Dosign Cowds	DIS		16000	
12/8/23	Paypal	Process	MON		.63	
12/1923	Pay Pal	Process Fee	man		1.07	
2/25/23	Pay Pal	Process Fee	Mon		.94	
2,28,23	Pay Pall	Process	mm	Ļ	.94	
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CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS (2) I.D. Number (1) Cover Period (3)(5) (7) (8) (10) (11) (12) Date **Full Name** Purpose (6) (Last, Suffix, First, Middle) (add office sought if Street Address & Sequence contribution to a Related Distribution Number City, State, Zip Code candidate) **Expenditures Amendment** Amount Type SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES