

2024 JUL -1 AM 10:10

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CITY CLERK'S OFFICE
CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ted Insera
Name
(2) 901 SW 19th St.
Address (number and street)
Ft. Land Fl. 33315
City, State, Zip Code

CITY CLERK'S OFFICE
OFFICE USE ONLY

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Dist. 4 City Commissioner
- 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 6/15/24 To 6/28/24 Report Type: 2024P2

- Original
- Amendment
- Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 50.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 348.94

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, _____

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,282.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, 2,167.85

(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) Ted Insera

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

X Ted Insera

Signature

(Type name) Ted Insera

- Candidate
- Chairperson (only for PC and PTY)

X Ted Insera

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Ted Insera (2) I.D. Number _____

(3) Cover Period 6 / 15 / 24 through 6 / 28 / 24 (4) Page 1 of 1

(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	Amendment	Amount
6, 16, 24	William Insera		Cousin	Che			50 ⁰⁰
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CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS

(1) Name Ted Inserra (2) I.D. Number _____
(3) Cover Period 6/15/24 through 6/28/24 (4) Page 1 of 1

(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Related Expenditures	(10) Amendment	(11) Amount	(12) Distribution Type
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