	CTM OF COOT I ALLOHOUSE
CAMPAIGN TREASUR	RER'S REPORT SUMMARY
(1) Rame 1 SCALA	OFFICE USE ONLY CITY CLERK'S OFFICE
Addrees (number and street) City, State, Zip Code	33315
☐ Check here if address has changed	(3) ID Number:
(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	☐ Check here if PC or ECO has disbanded ☐ Check here if PTY has disbanded
individual making electioneering communications)	☐ Check here if no other IE or EC reports will be filed
Cover Period: From/////	rt Identifiers 2 / 21 / 24 Report Type: 2024Q1 Decial Election Report
(6) Contributions This Report	(7) Expenditures This Report
Cash & Checks \$,, <u>845,00</u>	Monetary Expenditures \$, , , 5
toans \$,, Total Monetary \$, ,845 00	Transfers to Office Account \$, ,
In-Kind \$,,	Total Monetary \$, , 15 . 78
	(8) Other Distributions \$, ,
9) TOTAL Monetary Contributions To Date \$,,,	(10) TOTAL Monetary Expenditures To Date \$
(11) Cert It is a first degree misdemeanor for any perso	on to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, corre	ect, and complete:
(Type name) C Secretary S	(Type name) C S C C C C C C C C C C C C C C C C C
X Signature	X Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

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VO	

(1) Name 16d 15erra (2) I.D. Number 2024 81

(3) Cover Period 1/1/24 through 3/21/24 (4) Page 1 of ____

(5)						
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)
(6) Sequence	(Last, Suffix, First, Middle) Street Address &	Contributor	Contribution	In-kind		
Number	City, State, Zip Code	Type Occupation	- A - C- C	Description	Amendment	Amount
11,2 24	Lorginne					
	O'Neil	Friend	Che			5000
	010011					
9,324	Dances					
170 01	Denviz	Cousin	CHE			10000
	Inslike	0000		-		100
1 / 211	10 H					,
1,6,24	Matthew		0.10		-	EDO)
	Hakm	Frend	CHY		1	20-
* 21 14	. 1					
1 ,31 ,24	Kathleen		ALIA			26 2
	Cohn	friend	CT		C	25,00
1,31,24	11W	0	1			
	Inserta	B10,	CHE			00.00
						(-0,0-
2,5 24	Lorrane					
	O'Neil	Friend	CHE		-	25,00
	0 13011	1100			0	
2724	Mathew		-110			
	Mathew	Friend (CHCL		18	000
DS-DF 13 (Rev. 11/13)	CFF	PENEDOLUM				

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

hank or

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Ted Insorra (2) I.D. Number 2024 Q								
(3) Cover Period 1 / 1 / 24 through 3 / 21 / 24 (4) Page 2 of								
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	C Type	(8) contributor Occupation	(9) Contribution Type	(10) In-kind Description	(11)	(12)	
2.33.24	Garlord Wood		Fred		2 ccompact		(00,00	
2,29,24	Lovainne O'Neil		Friend	Che			25.00	
3,624	Mathew		Fred	Che			100.00	
3,8,24	Geraldine Tavares		Friend	Che			2000	
3, 18,24	Shirtey Saffey		Friend	Che			5000	
1 1			9					
							-	
DS-DE 13 (Rev. 11/1;	3) S	EE RE\	/ERSE FOR IN	ISTRUCTIONS	AND CODE VALU	FS		

PR 3.

(2) I.D. Number 2024

(4) Page _ [AMPAIGN TREASURER'S REPORT - FUND TRANSFERS (3) Cover Period (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**

Pg 4

MPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES (1) Name (2) I.D. Number through 3/21/2" (3) Cover Period (4) Page (7) (5) (9) (10)(11) Date **Full Name Purpose** (Last, Suffix, First, Middle) (6)(add office sought if Street Address & Sequence contribution to a Expenditure City, State, Zip Code Number candidate) Type **Amendment** Amount Process MON topp Process MON 3.38 Process 1,21 MM Process 1.21 NM Process 3,38 Mon Process 1501 Mon. Process 3,38

CAMPAIGN TREASURER'S REPORT - ITEMIZED DISTRIBUTIONS (1)Name (2) I.D. Number 2014 Q through 3/2/12L (3)**Cover Period** (4) Page of (5) Date (7) Full Name (8) Purpose (10) (11) (12)(6)(Last, Suffix, First, Middle) (add office sought if Sequence Street Address & contribution to a Related Number City, State, Zip Code Distribution candidate) **Expenditures Amendment Amount** Type