CAMPAIGN TREASURER'S REPORT SUMMARY								
(1)	TIM BRADY	OFFICE USE ONLY						
	Name							
(2)	Address (number and street)							
	NOLOMIS FL 34275							
	City, State, Zip Code							
	Check here if address has changed	(3) ID Number:						
(4)	Check appropriate box(es):							
	Candidate Office Sought: VENICE CIT	4COUNCIL - SEAT 6						
	<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	Check here if PC or ECO has disbanded						
	Party Executive Committee (PTY)	Check here if PTY has disbanded						
	☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed						
	Individual making electioneering communications)							
	(5) Report	Identifiers						
Cov	er Period: From 10 / 5 / 19 To	10/18/19 Report Type: 2019 62						
Original Amendment Special Election Report								
(6)	Contributions This Report	(7) Expenditures This Report						
		Monetary						
Cas	h & Checks \$,, _75 . <u>60</u>	Expenditures \$ , , 49 . 99						
Loans \$ , , .		Transfers to						
		Office Account \$ , ,						
Tota	Monetary \$,							
		Total Monetary \$ , ,						
In-K	ind \$, ,, ,							
		(8) Other Distributions						
		\$ , ,						
(9)	TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date						
	\$,3,200.00	\$,1, <u>649</u> . <u>27</u>						
(44) Continue								
(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) TIM BRADY								
	Individual (only for IE Treasurer Deputy Treasurer electioneering comm.)	Candidate Chairperson (only for PC and PTY)						
l oi								
<u> </u>	Sim Boz	X Vin Bondy						
S	ignature /	Signature						

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name (2) I.D. Number								
(3) Cover Period 10 / 5 / 19 through 10 / 18 / 19 (4) Page / of /								
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)	
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation		Contribution Type	In-kind Description	Amendment	Amount	
10, 7,19	TURNER STRACFFER 595 CRANINA AVE VENICE, FL 34285	1	RETIRES	CHE			25.00	
2	JOHN DONAHUE 1955 NOCTURNE RO VENICE, FL 34293	ì	RETIRED	CHE			50.00	
1 1							i	
1 1								
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1 1								

DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

(1) Namo	CAMPAIGN TREASURER'S REI				
	TIM BRADY  d 10/5/19 through 10/				
(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) Expenditure Type	(10)	(11)
10/15/19	MAIL CHIMP/ROCKET SCIENCE GROUP LLC 675 PONCE DELEON AUE NE SUITE SEON ATLANTA, GA 30308	EMAIL SERVICES	mov		\$49.99
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