

CAMPAIGN TREASURER'S REPORT SUMMARY

JUL 13 '20 PM 3:23

OFFICE USE ONLY

(1) Bill Willson
Name

(2) 708 APALACHICOLA Rd
Address (number and street)

Venice, FL 34285
City, State, Zip Code

Check here if address has changed

(3) ID Number: _____

(4) Check appropriate box(es):

- Candidate Office Sought: Venice City Council SEAT 2
- 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 06/27/2020 To 07/10/2020 Report Type: P3

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____, _____, 100.00

Loans \$ _____, _____, _____

Total Monetary \$ _____, _____, 100.00

In-Kind \$ _____, _____, _____

(7) Expenditures This Report

Monetary Expenditures \$ _____, _____, 113.65

Transfers to Office Account \$ _____, _____, _____

Total Monetary \$ _____, _____, 113.65

(8) Other Distributions

\$ _____, _____, _____

(9) TOTAL Monetary Contributions To Date

\$ _____, 2,100.00

(10) TOTAL Monetary Expenditures To Date

\$ _____, _____, 452.73

(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) Bill Willson

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

X Bill Willson
Signature

(Type name) Bill Willson

Candidate Chairperson (only for PC and PTY)

X Bill Willson
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Bill Willson (2) I.D. Number _____

(3) Cover Period 06 12 2020 through 07 1 10 2020 (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		Amount
07, 09, 2020	Linda Bradway 343 Melrose Ct Venice, FL 34292	I	Restor	CHE			100.00
1							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Bill Wilson

(2) I.D. Number _____

(3) Cover Period 06/27/2020 through 07/10/2020

(4) Page 1 of 1

(5) Date	(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) Amendment	(11) Amount
07/06/2020	VENICE PRINT CENTER 2021 S. TAMMAMI TR VENICE, FL 33429	PRINTING Brochures	CAN		113.65
1					
///					
///					
///					
///					
///					
///					
///					